

## np driver liability waiver

DRIVER INFORMATION	First Name:	Last Name:
	Mailing Address:	
	Driver's Licence:	Licence Plate #:
	Insurance Provider:	Car Make/ Model:
WAIVER OF LIABILITY	As a driver, I	
	(Applicant signature)	(Date signed)
PASSENGERS	As a passenger, I (Organization Name), including its officers, agents, and employees, from all costs, liability, damages, or expenses (including the cost of suit and expense of legal services). I hold them blameless for any injury or damage to persons or property, including severe injury or death, in the case that it arises from this activity. I acknowledge that, as a passenger, I assume all risk of accompanying a driver in their personal vehicle.	
	(Applicant signature)	(Date signed)