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Younger Driver (18-20) Additional Insurance Consent

Name of Applicant Name of person providing insurance for Applicant Relationship to Applicant

This form is to be completed by the person providing insurance for younger drivers (18-20) seeking CarShare Vermont membership.

Street Address:
City, State, Zip:
Phone (day): Phone (eve)
Email address:

I agree to be responsible for and pay any payments and other amounts due CarShare Vermont on the Applicant's account, if s/he fails to do so.

I recognize that this Consent, together with the Membership Agreement, will become a binding contract on me, and that CarShare Vermont's approval of the Applicant's application is subject to my execution of this Agreement, including, without limitation, my fulfillment of the secondary insurance coverage requirement described below.

I represent and warrant that I have and will maintain liability insurance coverage in the amount of at least three hundred thousand dollars (\$300,000) as well as comprehensive coverage with deductibles no less than one thousand dollars (\$1,000). I believe, to the best of my knowledge, this will cover the Applicant's operation and use of the vehicle(s) to be provided to the Applicant by CarShare Vermont, and I have confirmed this coverage and the applicability thereof to the Applicant's use of CarShare Vermont vehicles. I will maintain such insurance until the Applicant's CarShare Vermont membership is terminated, or the Applicant turns 21, whichever is earlier. I agree that I will be responsible for the payment of any claims, damages, or other amounts not covered by insurance in the event of an accident or other incident in which the Applicant is involved.

Name of Insurance Company

Contact Name (Insurance Agent) Phone

Please also provide a copy of the first (declarations) page of your insurance policy.

I waive any right I have to sue or make claims against CarShare Vermont and its respective directors, officers, agents, employees or other Members for any damages or losses arising out of or in connection with either vehicle or property-related issues or personal injury-related issues (such as any damage or injury to persons or death). In no event will CarShare Vermont be liable for loss of profits or indirect, consequential or special damages, however caused. I also agree to indemnify and hold harmless CarShare Vermont and its directors, officers, agents, or employees in the event that any of them incurs liability and/or expense (including, without limitation, attorney's fees and costs) as result of a claim by a third party arising out of use of a CarShare Vermont vehicle through the Applicant's membership, except to the extent that CarShare Vermont's gross negligence was the sole cause of the damage or liability. Notwithstanding the above, I do not waive any rights to make claims against CarShare Vermont for damages arising solely from CarShare Vermont's gross negligence. Provisions for notice and governing law follow the CarShare Vermont Membership Agreement.

Signature of person providing insurance for Applicant

Date