



FIRST
LUTHERAN
CHURCH

Transportation Ministry of First Lutheran Church

First Lutheran Church is a community of caring individuals. We recognize there are First Lutheran members who need transportation to medical and other appointments. Jesus charged us “to love one another as he has loved us” and this is one way we can minister to our church family when needing help with transportation.

We invite you to participate in this new ministry as a driver or as a person who needs transportation.

*So then, as we have opportunity, let us do good to everyone,
and especially to those who are of the household of faith.
Galatians 6:10*

First Lutheran Church
1551 S. 70th St, Lincoln, NE 68506
www.flclincoln.org -- 402.488.0919

Manual for Drivers – First Lutheran Transportation Ministry

Thank you for being open to serving as a driver for First Lutheran's Transportation Ministry. Please fill out the attached forms completely and sign. Forms can be returned in a scan form or a hard copy.

First Lutheran will provide transportation for members of our congregation upon request for medical and other appointments. We will match drivers with passengers when needed. Passengers will contact a coordinator who will make the arrangements.

All passengers need to have ride requests scheduled the week before they are needed. Drivers will be contacted as soon as possible. We realize not all volunteers will be available when a passenger schedules an appointment. You can help make for smooth assignments by letting us know in advance of a vacation or planned times when you cannot volunteer so that we can plan accordingly.

- All drivers must have a good driving record – no high risk insurance or multiple traffic violations.
- Must have an automobile which is safe and in roadworthy condition.
- Must be honest, reliable, patient, understanding, sensitive to your passenger and nondiscriminatory.
- Drivers are volunteers and serve at the discretion of First Lutheran Church.
- Include a copy of current and valid Nebraska driver's license, a copy of the car registration for any car you might be using and a copy of your insurance card which will show coverage.
- Confirm the appointment the day before with the rider-their address (and directions if needed), any special information, time and address of appointment. Arrive at the home in enough time to get to the scheduled appointment on time. Ask how long the appointment will be and if you should wait for them or return later.
- Transport in a safe manner to and from appointment.
- Keep all information about the passenger confidential.

Drivers must not:

- Physically lift or pick up a client.
- Put yourself in a compromised situation.
- Smoke in your vehicle or allow them to smoke as we don't always know the rider's health issues.
- Accept payment. If a rider insists, they can make a donation to First Lutheran Church and/or the Transportation Ministry at First Lutheran. Donations are not expected or assumed. Note:

Accepting payment may be in conflict with your personal car insurance which could mean you can no longer serve as a driver.

Insurance Coverage and Accidents

- Check your personal automobile liability insurance to ensure that you are protected. Be sure to inform your insurance carrier that you are a volunteer driver and not paid.
- Always do your best to protect both yourself and your passenger. As a volunteer, you are covered by the Good Samaritan Law when attempting to help others. The church policy may also be applied.
- Use your own judgement related to weather and road conditions. If bad weather is predicted or present before you are scheduled to drive, call a coordinator and/or passenger to discuss cancelling or delaying the trip. Notify the coordinator if you and the passenger change plans
- If an accident occurs, the first and most important thing to do is to ensure the safety of you and your passenger. If you or your passenger is injured in any way, do not move him or her unless remaining in the car poses a critical danger. When help arrives, they will be able to determine the appropriate action.
- If your passenger falls, do not move them. Do not risk injury to yourself or your passenger. Summon help immediately.
- If your passenger becomes ill, do not panic or try to offer assistance while driving. If your passenger is unconscious, pull over and dial 911 for emergency medical assistance. Do not move the person yourself unless he/she is endangering your ability to drive safely. If your passenger is conscious, drive to the destination requested by your passenger, such as the emergency room or doctor's office.
- Report the accident/incident to the necessary authorities including the Transportation Coordinator, who will notify First Lutheran Church and see that an Incident Report Form is filed. The incident report form and any forms needed by First Lutheran Church will require documentation of time, location, date, situation, names and contact of others involved in the accident and names and contact of witnesses.

Volunteer Driver Agreement – First Lutheran Transportation Ministry

As a volunteer driver for First Lutheran Church, I understand that my safety and the safety of others is paramount. I understand that driving as a volunteer is a privilege to serve others, not a right.

Therefore, I agree:

- To comply with all laws and regulations pertaining to the use of seat belts and cell phone use
- To observe and obey speed limits and all other traffic laws and regulations concerning driving
- To promptly notify one of the coordinators of any physical conditions, vehicle defects or road conditions that might affect my safety or the safety of those I am driving
- To notify one of the Transportation Coordinators of any traffic citations I receive, even if given while driving on my personal time
- That when driving my own vehicle on behalf of First Lutheran Church, adequate insurance will always be in force
- To complete the Drivers Information Form and the online Background Check and Driver Approval Form

Print name as shown on official documents: _____

Signature: _____

Date: _____

Please return completed forms to:

Linda Maack
6360 Ashbrook Drive
Lincoln, NE 68516
lindasmaack@gmail.com
(402) 560-6040

Driver Information - First Lutheran Transportation Ministry

Name _____

Address _____ City _____ Zip _____

Phone Number _____ Cell _____

Email _____ Preferred Contact? _____

Driver's License # _____ Birthdate _____

License Plate # _____

If you have more than one car that you may use, please list the license plate # for the second car.

Car Insurance Carrier _____ I have liability insurance.

General Availability:

Day	AM	PM
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Would you be available to drive to Omaha or other nearby towns: **YES** **NO**

Do you need training? Example: assisting people using walkers, wheelchairs or canes, visually impaired or hearing impaired _____

Office Use: Background check approved. Date _____

Statement of Agreement & Release of Liability – First Lutheran Transportation Ministry – Drivers

I have read the Manual for Drivers for First Lutheran Church’s Transportation Ministry. I agree to adhere to those policies and procedures.

Print Name: _____

Signature: _____

Date: _____

Release of Liability for Injury

In signing this form, I agree to release First Lutheran Church from all liability in the event that I receive any injury while providing transportation services from the volunteer driver.

Print Name: _____

Signature: _____

Date: _____

Transportation Coordinator Signature: _____

Date: _____

Transportation Request – First Lutheran Transportation Ministry

First Lutheran will strive to provide transportation for members of our congregation upon request for medical and other appointments. We will match drivers with passengers when needed. Passengers will contact a coordinator who will make the arrangements. Please leave a message if no one is available to take your call. Your important phone call will be returned.

Rides will be assigned on or before Thursday for the next week. Rides need to be scheduled one week prior to your appointment. It is important to request transportation as early as possible to help ensure the availability of the volunteers. We do not guarantee transportation, but will do our best to provide this service.

Your first call to the Transportation Coordinator(s) will consist of giving the following information: (Please do not contact the drivers directly.)

Name _____ Phone _____

Address _____ City _____ Zip _____

Instructions the driver needs to know _____

Any mobility issues or special needs that may require additional support _____

Emergency Contact Person's Name _____

Phone Number _____ Relationship _____

Destination – Doctor or Building _____

Address _____

Date and Time of Appointment _____ Approximate Length _____

The Transportation Coordinator will contact you to inform you of the volunteer picking you up. It is important to be on time and notify the coordinator if your appointment is cancelled or changed for any reason.

Transportation Coordinators: Linda Maack: 402-560-6040; lindasmaack@gmail.com and Judy Bailey: 402-432-9976; jkbailey47@gmail.com.

Passenger Information - First Lutheran Transportation Ministry

Name _____

Do you have another name a doctor may use? Example: Your name is Margaret, but you go by Peg.

Address _____ City _____ Zip _____

Best way to contact you _____

Home Phone _____

Cell Phone _____ OK to Text? _____

Email _____

Emergency Contact Name: _____

Relationship: _____

Phone number: _____

Print Name _____

Signature _____

Date _____

Disability challenges and/or equipment you may be using: walker, wheelchair, cane, visually challenged, hearing challenged, use of oxygen, diabetes, other

Please return completed forms to: Linda Maack
6360 Ashbrook Drive
Lincoln, NE 68516
lindasmaack@gmail.com
(402) 560-6040

Statement of Agreement & Release of Liability - First Lutheran Transportation Ministry - Rider/ Passenger

I have read the information provided for riders/passengers for First Lutheran Church's Transportation Ministry. I agree to adhere to those policies and procedures.

Print Name: _____

Signature: _____

Date: _____

Release of Liability for Injury

In signing this form, I agree to release First Lutheran Church from all liability in the event that I receive any injury while receiving transportation services from the volunteer driver.

Print Name: _____

Signature: _____

Date: _____

Transportation Coordinator Signature: _____

Date: _____