

# **CALGARY MINOR BASKETBALL ASSOCIATION**

## **DRIVING & VEHICLE USE POLICY**

### **1. PURPOSE**

The purpose of this policy is to protect CMBA from liability exposure, ensure safe vehicle operation while performing CMBA duties, clarify insurance responsibility, comply with Alberta Occupational Health & Safety requirements, and reduce organizational risk.

### **2. SCOPE**

This policy applies to employees, volunteers, student placements, interns (paid and unpaid), contractors, officials, board members, and any individual operating a vehicle while performing CMBA duties.

### **3. GENERAL PRINCIPLE**

CMBA does not assume primary liability for personal vehicles. Personal auto insurance is primary. CMBA insurance is secondary and excess only.

### **4. ELIGIBILITY TO DRIVE ON CMBA BUSINESS**

Drivers must hold a valid license recognized in Alberta, provide proof of current auto insurance with minimum \$2,000,000 third-party liability coverage, sign a Driving Acknowledgment Form, and have no active license suspension.

### **5. USE OF PERSONAL VEHICLES**

Personal vehicle insurance is primary. CMBA will not pay for vehicle damage, deductibles, increased premiums, traffic violations, or fines.

### **6. PROHIBITED CONDUCT**

Use of handheld devices, impaired driving, reckless driving, unauthorized passengers, and personal errands during CMBA duties are strictly prohibited.

## **7. ACCIDENT REPORTING PROCEDURE**

Ensure safety first. Do not admit fault. Exchange information. Take photos. Notify supervisor within 24 hours. Complete CMBA Incident Report Form.

## **8. WORKERS' COMPENSATION**

Travel between job sites may be considered work-related. CMBA will report incidents to WCB-Alberta where required.

## **9. INTERN & STUDENT PROVISION**

Unpaid interns and students must independently meet eligibility requirements and provide proof of insurance.

## **10. RECORD KEEPING**

CMBA will retain acknowledgments, insurance documentation, and incident reports for minimum 7 years.

## **DRIVING ACKNOWLEDGMENT**

I acknowledge that I have read and understand this policy, hold a valid driver's license, carry minimum \$2,000,000 liability insurance, understand my insurance is primary, and will report any accident immediately. Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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