Drivers Ed. LLC	AllSafe Drivers Ed LLC Office and Classroom: 14160 N. Fenton Rd, Fenton, MI 48430		T.I.P #	#	
	State of Michigan Office Hours: Mo	Provider Certificate Number P(n – Thurs 10 am – 2 pm (810) 86 N. Irish, Davison, MI 48423		LOCATION: DAVIS	ON FENTON
SUPPL	EMENTAL DRIVING	INSTRUCTION FOR ADUL	TS, AND MINORS V	VHO HAVE COMPLETED	SEGMENT I
Student Name	(as on T.I.P.)				
Address		С	ity	State	Zip
Age Date of Birth / / / / / / / / / / / / / / / / / / /		// Home Pho	one	Cell Phone	
Please circle r	elationship to stude	ent:			
Parent / Legal	Guardian / Emerge	ncy Contact			
Address (if di	fferent from abov	/e)	City	State	Zip
Home Phone_		Cell Phone		Work	
		PRO	VISIONS]	
 AllSafe Drivers Ed LLC will provide behind the wheel instruction for adults in one-hour increments. AllSafe Drivers Ed LLC will also provide behind- the-wheel instruction for minors who have completed Segment I and are interested in additional instruction. The extent of the education depends upon the particular needs of the individual student. Classroom instruction may also be provided at the discretion of the instructor depending upon the needs of the student. AllSafe Drivers Ed LLC will conduct the behind-the-wheel Instruction in a dual-controlled automobile that is fully insured to cover each student enrolled in the program. 					
		TE	RMS		
Segment One courefundable. There A \$25 fee will be discretion. In the event of a comust be received drive by leaving a	urse can be purchased e will be a \$30 fee for a charged for replacemen driving appointment car before rescheduling.	led at a cash only hourly rate of by cash or check and full payment ny returned check. There is no not of the loaned manual. The so nocellation, a cancellation fee of \$ Fo reschedule, please call your is phone. If an adult misses a Se	ent of \$350 is due before cost for materials or sup chool reserves the right t 625.00 will be charged if nstructors cell phone nu	e the first day of class, of whic plies unless the loaned manua o cancel or reschedule a sess 24 hours advance notice is no mber and/or the office. You c	h \$50 is non- al is lost or damaged. ion at its sole ot given. Payment annot cancel your
-	-	REFUN	D POLICY		
refund may be graciass. No refund	anted at the discretion	n circumstances prevent the stur of the school; providing no drivir ut the return of any loaned mate V training.	ng time has been investe	ed in the student. There is no r	
WE,	THE UNDERSIGN	NED, UNDERSTAND AN	D AGREE WITH TH	HE ABOVE PROVISION	IS.
Check desired	payment option:	So per hour paid in	cash only	Number of BTW hours	
	pay	□ \$350 for Full Segme		Date/Time of Course	
				maric (ames
SIGNATURE OF	STUDENT	SIGNATURE OF P/	ARENT/GUARDIAN When applicable)	AUTHORIZED SCHOOL F	REPRESENTATIVE
DATE		DATE PAID			
with the prov	ider, please complete t	vider is required to be certified I the Driver Education Complaint Completion of driver education	form under "Driver Pro	grams Division" on the Depar	