

BARRINGER's DRIVING SCHOOL LLC
Address: 107 Circle View Drive; Madison Heights, VA 24572
Phone Number: 434-515-2480
Email Address: jd@barringersdrivingschool.com
Owner: James D. Barringer (J.D.)

There will be a minimum of 14-50 minute sessions of behind-the-wheel instruction for those taking this portion of Driver's Education. Seven 50 minute driving sessions and seven 50 minute observation sessions.

All fees are payable in Advance to: BARRINGER's DRIVING SCHOOL LLC

The fee for the behind-the-wheel instruction is \$_____ per student.

The student must present a valid copy of his/her Learner's Permit, and a DEC-1 Card.

Attendance at a driver training school is not required for students who obtained a Learner's Permit at age 18 years and over and who have held the Learner's Permit for at least 60 days. The school will not refund any tuition monies or any part thereof when actual services have been rendered. The school will provide a refund if services are not rendered within a reasonable amount of time.

The school cannot and does not guarantee that the student will successfully pass the examination given by the Department of Motor Vehicles upon completion of the course. The school does agree to exert its best efforts in teaching the student to meet the requirements of the examinations.

The student understands that there are risks inherent in operating a motor vehicle. The student does hereby specifically assume all risks as may be incurred in the normal operation of a motor vehicle during the course instruction. All vehicles are fully insured with liability insurance. The student hereby fully and completely releases the school, its agents, and employees, from any liability whatsoever, and from any and all claims or causes resulting from any damage or injuries suffered by the student during this course to the extent that such claims shall not be covered by the school's insurance coverage.

Any missed periods of instruction will be made up at the next available time that is suitable for the student and the school.

In the event that one-on-one training is necessary, the student will still be required to meet the observation requirements with at least one other student in the car.

Parent or legal guardian signature: _____ Date _____

Student signature _____ Date _____

Student's full legal name _____ Date of Birth _____

Student Contact Number(s): Cell# _____ Home # _____

Learner's Permit Number _____ Expiration Date _____ Restrictions _____

Parent/Guardian: _____ Home# _____ Work# _____ Cell# _____

Address: _____

Contract Date _____

DMV IS COMMITTED TO PROMOTING TRANSPORTATION SAFETY THROUGH THE CERTIFICATION OF QUALITY DRIVER TRAINING PROGRAMS. IF YOU HAVE COMMENTS OR CONCERNS ABOUT THIS COURSE, CONTACT DMV AT: 1-800-885-5790
EMAIL: dmvclu@dmv.virginia.gov