

Driving Instruction Agreement/Registration Form

1	(herein referred to a	s 'parent') agrees to pa	y the tuition fee as set forth below.
Parent also agrees to practice dri	ving with the student a m	ninimum of fifteen (15)	hours – some of which should be
after dark – during the five week o	ourse.		
2	DOB	(referred t	o as 'student') agrees to attend all
scheduled classes, attend all sch			ssignments and practice driving a
minimum of fifteen (15) hours–so		•	
` '		_	e Washington State Traffic Safety
Education course and will issue –			-
certificate.	, , , , , , , , , , , , , , , , , , ,	,	
	Fe	es	
The registration fee for the cour			by cash, check or credit card to
EXCELeration Driving School.	30 13 TWO Humarca doll	.ars (\$300.00) payable	by cash, check of creat cara to
The refund policy allows that:			
a. For the withdrawal du	ring the first week of class	ee the full amount of th	ne fee will be refunded
b. Withdrawal during the	· ·		
c. No refund will be mad			•
			t have their learner's normit at their
		ours notice, or does not	t have their learner's permit at their
appointment, they will be charge		ad Daguiramanta	
The control of the co	_	nd Requirements	
The student must be at least 15 y	_	_	
State regulations require attendance at all classroom sessions. If the student misses a classroom session, it must be made up before a certificate may be issued. EDS allows for a maximum of three (3) classes to be made up.			
•	-		• •
There is also a maximum of 6 mo	•	•	
Students may not enroll in a cour			
•			is under 18 years of age. Per RCW
		•	e Department of Licensing requires
that we inform students and pare		•	
Donation. Please initial here tha	t you have received the	attached statement of	of those rules and the Organ
Donation for Life facts.			
BY MY SIGNATURE, I ACKNOW	LEDGE THAT I HAVE RI	EAD THIS AGREEMEN	NT AND UNDERSTAND AND
AGREE TO ALL ITS PROVISION	S.		
Parent Signature	Student Si	<u> </u>	EDS Representative
raient Signature	Student Si	gnature	LD3 Nepresentative
Address	Parent Pho	one #	Class Date
City/State/Zip	Parent Em	 ail	WDL Number
•			
Student Email			