Drivers 2B Registration Form				
[Office use only: Date Received	Receipt#	Amount	Session]
**Return form, \$75 deposit or \$385 if paid	d in full to: Drivers 2B, 644	4 Hillcrest Dr., Waupa	ca, WI 54981 or call 715.2	258.7887
Student's Full Legal Name				
Student's Month/Day/Year of Birth		PARENT or GUARD	NAN'S Home Phone / Cell	Number
Student's Address, City, State, Zip Code				
Parent's Signature				
Check one:DepositOnl	yEntire	e Course		
Check course desired:Classroo	om & BTWCl	lassroom	_BTWRefr	esher
<u>2018</u>				
JUNE 11 - JUNE 29 <u>8-10 A.M.</u>	[WAUPACA]			
JUNE 11 - JUNE 29 <u>6-8 P.M.</u> [WAUPACA]			
JULY 9 - JULY 27 8-10 A.M. [W	'AUPACA]			
AUGUST 6 - AUGUST 24 [WAL	IPACA]			
SEPTEMBER 24 - OCTOBER 12	[WAUPACA]			
OCTOBER 29 - NOVEMBER 16 [WAUPACA]				
OCTOBER 29 - NOVEMBER 16	[AMHERST]			
DECEMBER 3 - DECEMBER 21	[WAUPACA]			
2019				
JANUARY 21 - FEBRUARY 8 [W	'AUPACA]			
FEBRUARY 25 - MARCH 15 [W	/AUPACA]			
MARCH 4 - MARCH 22 [AMHE	RST]			
APRIL 22 - MAY 10 [WAUPACA	1			

^{***}Minimum of 12 Students for class to be held so bring a friend.