

**King of the Road Driving School, LLC
Segment I Student Contract**

Mailing Address: PO Box 58, Standish, MI Phone: 989-846-0372

Office Address: 425 E. Cedar St., Standish, MI 48658

Office Hours: Monday - Friday 9:00am - 5:00pm

Class Location and Starting Date: _____

State License Number: P000333 **Program Number:** _____ (Leave Blank Instructor Will Complete)

This contract is entered into by and between King of the Road Driving School, LLC and Name of Student (as it appears on the birth certificate):

Full Name _____

First

Middle

Last

Address _____

City _____ State _____ Zip _____

Phone Number _____ Age _____ Birth Date _____ High School _____

King of the Road Driving School, LLC shall provide a total of twenty-four hours of classroom instruction and six hours behind-the-wheel instruction for a fee of \$ _____, paid in full prior to the start of the first class. Cash, check or money order will be accepted for payment. The school will provide a licensed instructor, vehicle and fuel for the driving instruction. Also, the King of the Road Driving School, LLC shall supply all written materials. **No instruction shall commence until the student has paid fees in full and has verified his/her birth date with their birth certificate to King of the Road Driving School, LLC.**

REFUND POLICY/MAKE UP DAYS: A full refund will occur if the student pays for the class but withdraws before class starts. Once the student has started class, there will be no refund. Students will be allowed to make up one absence from classroom instruction. A fee will be charged for textbooks that are damaged or need to be replaced.

Parent/Guardian Permission for Driver Education Instruction: I hereby give consent for my son/daughter/minor child, as stated above, to take a complete course of Driver's Education, which includes thirty hours of instruction (24 classroom hours & 6 behind-the-wheel hours), listed in this contract. This course is conducted under the supervision of a state certified instructor. To pass the class, the student must have a class average of 75% and 80% on the final exam.

Notice: This school is required to be licensed by the Michigan Department of State, Program Operations Division. If you have a complaint, which you cannot settle with this school, write to: Michigan Department of State, Program Operations Division, Lansing, MI 48918. **Completion of driver training instruction does not guarantee qualification for a driver license. King of the Road Driving School, LLC will conduct the behind-the-wheel instruction in a dual controlled automobile, fully insured, covering each student enrolled in the program. The student must be at least 14 years 8 months of age by the beginning of class (verification by birth certificate required).**

Additional Information Required:

Student Gender: Male _____ Female _____

Family Doctor: _____ Telephone: _____

Does student have any physical disabilities? _____ If yes, explain: _____

Does student wear corrective lenses? _____ When was vision last checked? _____

Has the student ever taken Driver's Education before? _____ Has the student ever had a license suspended or revoked? _____

I understand that it is imperative that student arrive on time for their scheduled driving time. Students who need to change a driving time must contact the driving instructor at least 24 hours prior to their scheduled driving time or a \$35.00 cancellation fee will be charged. The student will not be allowed to drive again until all cancellation fees are paid. Students may purchase two additional hours of driving time at a rate of \$35.00 per hour.

Date: _____ Student Signature: _____

Date: _____ Parent/Guardian Signature: _____

Date: _____ King of the Road Signature: _____

The Driving Record of each individual instructor is available for review upon request.

I hereby give my permission for my son/daughter/minor child _____

Full Name of Son/Daughter/Minor Child

to participate in 1:1, behind-the-wheel driving instruction conducted by King of the Road Driving School, LLC.

Parent/Guardian Signature Required

Date