



Please print the information:

This form is **required** before student may participate in any
Behind the wheel portion of Drivers Education.

Date: ___/___/_____

Applicants Name

Parent/Guardian Name

I/We hereby agree to the terms of wearing **my own mask** during **all Behind the wheel training**. Failure to do so **will** result in being removed from Behind the wheel and may result in an additional fee of **\$30.00** cash which must be paid in full by the student's next scheduled session.

Parent/Guardian Signature _____ Date _____

Student Signature _____ Date _____