



CONTRACT / REGISTRATION FORM

Date _____

I, (Student's Name) _____ hereby agree to take professional driving instructions consisting of 6 (six) hours behind the wheel instruction. The school agrees to furnish a car for all practical instructions without additional cost. It is agreed that an instructor or employee of this school shall not give the impression to a student that upon completion of their instructions, this school will guarantee the securing of a driver's license to operate a motor vehicle.

PARENT ALERT PLEASE READ CAREFULLY

- ❖ Refunds are not given after the first driving appointment.
- ❖ If a student is dismissed due to irresponsible or unacceptable behavior, no refund will be given.
- ❖ Cancelled driving appointments result in lost instructional hours. Driving appointments must be cancelled at least 24 hours in advance to avoid a \$40.00 rescheduling fee.
- ❖ Student must have a valid Georgia permit to begin the six-hour driving portion

This agreement constitutes the contract between the school and the student and no verbal statements will be recognized.

Signature of Student

Signature of Parent/Guardian

Name of student *as it appears on the birth certificate*: _____

FEE: \$275.00

Nickname _____

Parent's Name _____ Home Number _____

Alternate Phone (cell) _____ Work Phone _____

Address _____

City _____ Zip _____ email _____

School Currently attending _____ Date of Birth _____

Learner's Permit # _____ Date Issued _____

Does the student have learning problems or physical limitations? _____

For Credit Card payment :

Visa, MasterCard, Discover # _____ Exp.Date _____

Name of Cardholder: _____

Make check payable to Marietta Community School

Send completed form to the address or fax below
Marietta Community School
1171 Whitlock Ave.
Marietta, GA 30064

www.mariettacommunityschool.com

FAX: 770-429-3178
Phone: 770-429-3170 or
770-429-3171

For Office Use Only

Amount Paid _____

Contract # _____