



OFFICE USE ONLY:

PLEASE PRINT CLEARLY:

LAST NAME: _____

DATE G1 LICENCE ISSUED: _____

FIRST NAME: _____

YYYY/MM/DD

ADDRESS: _____

DRIVER LICENCE NUMBER: _____

POSTAL CODE: _____

ISSUE DATE: _____

RES. PHONE: _____

YYYY/MM/DD

BUS. PHONE: _____

EXPIRY DATE: _____

CELL PHONE: _____

YYYY/MM/DD

DATE: (YYYY/MM/DD)	REGISTRATION FORM #:	AMOUNT \$:	CASH/ E-TRANSFER:	INITIAL:	NOTES:

TERMS: All courses will require payment in full at the beginning of the first in-car or in-class session. The balance of the payment is due on or before the student has started the in-class BDE program. No in-vehicle lessons will be given until payment is made in full.

All fees paid are non-refundable. **A student has 1 year from the date of registration to complete the entire BDE program as per HTA Regulation 473/07 sec. 26 (2).** A replacement fee of \$18.00 (includes taxes) will be charged for the lost of a student workbook.

CONDITIONS: Students shall endeavour to give 24 hour's notice for any lesson cancellation. Failure to give proper cancellation notice by student will result in a fee of \$165 plus HST. Students are required to bring their own copy of the current Official Drivers Handbook to every in-class session.

Please be aware that all lessons are video recorded. We are pleased to announce this policy in the interest of safety and allow lessons to be reviewed for improvement of driver learning and performance.

I HERBY CERTIFY THIS TO BE A CORRECT STATEMENT OF FEES PAID TO ME BY THIS STUDENT.

INSTRUCTOR SIGNATURE: _____ **TOTAL:** \$ _____

1ST IN-VEHICLE LESSON: _____ / _____ / _____
AM/PM MONTH DAY YEAR

“I certify that the statements in this document are accurate and consent to the release of any information contained herein to the Ministry of Transportation, Insurance Bureau of Canada and the auditing firm retained by the Ministry”.

Client Signature

School Signature

MM/DD/YYYY