MED CITY DRIVING SCHOOL

P.O. Box 6914 Rochester, MN 55903 medcitydrivingschool@yahoo.com 507-289-8995

OR OFFICE USE ONLY:							
CONTRACT#25							
EXPDATE-							

STUDENT ENROLLMENT FORM

NAME:					
	FIRST	MIDDLE	LAST	DOB	
ADDRESS:					
	STREET	CITY	STATE	ZIP CODE	
CONTACT:					
	PHONE #1	PHONE #2		EMAIL ADDRESS	

MED CITY DRIVING SCHOOL does hereby agree to:Provide 30hrs of Minnesota based and approved Driver's Education Training & 6hrs of Behind The Wheel Training for a fee of \$400.00. Minimum payment of \$200.00 due by the first day of class and the balance must be paid in full on the last day of class for the student to be able to take Instruction Permit Exam.

Parents need to notify MCDS of a student's absence for BTW training in a reasonable time to avoid a \$50 penalty for an unexcused absence. No fee for a classroom absence, class can be made up at a later date.

MCDS will pick up BTW(ONLY)Rochester students at a predetermined location. Out of town students can arranged a suitable meeting location in advance of their session.

Pick up and drop off locations can be added in the *NOTES* box on the web based calendar, or it can be emailed in. Locations do not have to be the same place.

MCDS Contracts are valid for 1 year after student receives their Instruction Permit. Extensions for another year are \$75.00.

MN Instruction Permits are valid for 2 years.

REFUNDS will be issued in full if classes have not begun. After class begins refunds will be prorated depending on the number of sessions attended.

Students will follow the same behavior rules as Rochester School District #535 requires.

Class dates are subject to slight changes as we follow the school district calendar.

CLASS: D	ECEMBER 1-12, 20	25 JMHS RM 3-G18		TIME: 3:45-6:45pm
PARENT/C	GUARDIAN:			<u>DATE:</u>
STUDENT	·			DATE:
				DATE:
		EDIT CARD#		
VISA	MASTERCARD	AMERICAN EXPRESS	DISCOVER	PAYPAL
		1/2 PAYMENTFU	LL PAYMENT	