

**Safe Roads Driving Academy Inc.
 495 Electric Avenue
 Parkhill Plaza
 Fitchburg, MA 01420
 978-345-6200**

Registration Form

A learners Permit is not required to begin classroom lessons.

Print your full name as it will appear on your permit/drivers license; (please print clearly)

Student First Name	Full Middle Name	Student Last Name
Street Address	City, Zip	Date of Birth
Home Telephone Number	Student Cell Phone Number	High School
Parent/Guardian First Name	Parent/Guardian Last Name	Parent/Guardian Cell Phone
Student Email	Parent/Guardian Email	
Permit Number	Date Permit Obtained	
Referred by: First & Last Name	Referred by Home Address	

Please fill in the class session you're registering for:

Please make check payable to: **Safe Roads Driving Academy Inc.**
*A \$100.00 deposit is required at time of registration.
 Full program is \$675.00*

*******For Office Use Only*******

Total Cost: \$ _____ Includes Classroom, Driving, Parent Class and RMV Certificate

Registration Deposit: \$ _____ Date: _____ Cash _____ Check # _____

Balance: \$ _____ Registration Discount: \$ _____

“Your keys to successful driving”