



LET'S DRIVE DRIVING ACADEMY MS

STUDENT COURSE ENROLLMENT FORM

STUDENT INFORMATION

Student Full Name: _____

Date of Birth: _____ / _____ / _____ Age: _____

Gender (optional): Male Female Prefer not to say

Home Address: _____

City: _____ State: _____ Zip Code: _____

County of Residence: _____

Student Phone Number: _____ Student Email Address: _____

PARENT / GUARDIAN INFORMATION (IF STUDENT IS UNDER 18)

Parent/Guardian Name: _____ Parent/Guardian Phone Number: _____

Parent/Guardian Email: _____ Emergency Contact Name: _____

Emergency Contact Phone: _____ Emergency Contact Email: _____

COURSE SELECTION

Please select the course you are enrolling in:

Behind-the-Wheel (BTW) Training

Defensive Driving Course (Online)

Virtual Driver Education Class

Bundle (BTW + Online Course)

Permit Number (if applicable): _____

State Issued: _____

Expiration Date: _____ / _____ / _____

PERMIT / LICENSE INFORMATION

Do you currently have a learner's permit?

Yes No

If yes, please explain below:

SCHEDULING AVAILABILITY

Preferred Days:

Monday Tuesday Wednesday Thursday Friday
 Saturday

Preferred Time: Morning Afternoon Evening

SCHEDULING AVAILABILITY

Preferred Days: Monday Tuesday

Wednesday Thursday Friday

Saturday

Preferred Time: Morning Afternoon

Evening

Preferred Start Date: _____ / _____ / _____

PAYMENT INFORMATION

Course Fee: \$ _____ Payment Method: Card Money Order Online Other: _____

Amount Paid: \$ _____ Balance Due: \$ _____

FOR OFFICE USE ONLY

Enrollment Date: _____ / _____ / _____ Instructor Assigned: _____

Notes: _____

WAIVER & RELEASE OF LIABILITY

By signing below, I acknowledge that I have read and fully understand the following and agree to the terms:

Injury Liability Protection: I understand that driving instruction involves an inherent risk of injury. I voluntarily assume all risks of injury to myself and agree to release and hold harmless Let's Drive Driving Academy MS, its owners, instructors, and employees from any and all liability for any injury, illness, or death that may occur during or as a result of my participation in any driving instruction or activities.

Vehicle Damage Clause: I agree to be responsible for any and all damage to Let's Drive Driving Academy MS vehicles caused by my negligence, careless actions, or violation of driving rules.

Missed Lesson / Cancellation Policy: I understand that I must provide at least 24 hours' notice if I need to cancel or reschedule a lesson. Failure to do so will result in a cancellation fee of \$35. No-show without 24-hour notice will be charged the full lesson fee.

I have read this agreement, understand it fully, and agree to be bound by its terms.