**Cox Driving School**

4133 Valencia Road

Chesapeake, Va. 23321

Phone: (757)642-3178 Email: [dcfootball@verizon.net](mailto:dcfootball@verizon.net)

**Behind-The-Wheel Contract/Agreement for 18 years of age and over:**

This agreement is entered today (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) between Cox Driving School, Inc., located at 4133 Valencia Road, Chesapeake, VA 23321 **AND**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DOB: \_\_\_\_\_\_\_\_\_\_\_ Male/Female

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permit/License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Issue Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The following conditions must be read and understood prior to enrolling:**

1. Course consists of a minimum of 14 periods of Behind-The-Wheel instructions for students

18 years of age and over. (7 periods of observance and 7 periods of actual driving) at a cost

of $250.00. Each period is 50 minutes long.

1. Additional Behind-The-Wheel lessons are available at a cost of $45.00 per lesson. (Lessons are sixty minutes long) Free pick-up is provided if needed.
2. The course consists of 7 days, which do not have to be consecutive. This driving school will try to accommodate the student’s availability time and make a schedule accordingly. **A minimum of a 24 hour notice is required for cancellation of the Behind-The-Wheel lessons.**

**Failure to comply with this cancellation policy will result in a charge of $25.00.** When canceling, the student must speak to an office representative during the business hours or cancellation via email ([dcfootball@verizon.net](mailto:dcfootball@verizon.net)). *No exceptions.*

1. Student will be notified by phone call in the event this driving school cancels classes. Canceled classes will be made up at the end of the course.
2. This driving school does not guarantee that any student will pass the state license examination or that the student can secure a license or that the student will be guaranteed employment upon completion of any course instructions.
3. A $35.00 fee will be charged for all returned checks. A $25.00 processing fee will be charged for *replacement* of lost certificates.
4. A $35.00 charge will be applied to retest for a license.
5. Students are fully accountable for their conduct. They can be *dismissed* from this driving course for misconduct *without a refund*. Cell phones, food, drinks, smoking or sleeping are not permitted in the car.
6. It is the responsibility of the student to report any concerns regarding this driving school to the Department of Motor Vehicles.

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**I have read this contract and agree to abide by all conditions listed:**

Student’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Cox Driving School Rep Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

It should be emphasized that successful completion of a driver education program *does not* and *should not* imply that you are a safe, accomplished driver. During the course, the student is instructed in the basic skills necessary for the safe operation of a motor vehicle. However, as with any skills, it is only with repeated practice that the skill is developed and perfected.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby request to be enrolled in a state-approved behind-the-wheel program.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DMV is committed to promoting transportation safety through the certification of quality driver training programs. If you have comments or concerns about this course, call DMV at**

**1-877-885-5790 or email:** [**dmvclu@dmv.virginia.gov**](mailto:dmvclu@dmv.virginia.gov)

***For Office Use Only***

Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Check #: \_\_\_\_\_\_\_\_\_\_\_\_ Cash: \_\_\_\_\_\_ Money Order: \_\_\_\_\_\_

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