

# Total Control Driving Academy, LLC

763.219.9300

Name (as appears on birth certificate) \_\_\_\_\_  
(First) (Middle) (Last)

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Student's Phone # \_\_\_\_\_

Parent's Phone # \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_

Start Dates: Classroom: \_\_\_\_\_

Finished Classroom: \_\_\_\_\_

Location: (circle one) Elk River or St. Michael

BTW\*(fill in later) \_\_\_\_\_

Emergency Contact:

Name \_\_\_\_\_

Phone # \_\_\_\_\_

For Office Use: Payment Details _____ Receipt # _____ Permit # _____ Notes: _____ _____ _____
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Fees: Price Select

Fees:	Price	Select
Classroom & Behind-the-Wheel Combined	\$310	
Behind-the-Wheel Only	\$250	
Classroom Only	\$150	

- Full balance due 1<sup>st</sup> day of Class. (unless other arrangements have been made and must be written on this contract)
- Contract is good for one year from date signed \*\*after that price may go up
- No refunds on or after start date. Behind-the-Wheel will be scheduled after completion of classroom training.
- 24 hours minimum notice for cancellation of scheduled BTW lesson or \$30 fee charged and the hour rescheduled
- Only the instructors and up to two students will be allowed in the vehicle while a lesson is in progress
- A valid permit must be brought and kept with student at all times while driving
- This contract must be returned and payment in full before a completion card can be issued
- This contract constitutes a contract between the program and the student/parent and no verbal statements or promises will be recognized
- Please sign confirming agreement to the terms and conditions and return promptly.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Driving School Official Signature \_\_\_\_\_ Date \_\_\_\_\_