Date :_____ **A-ALERT DRIVING SCHOOL, LLC** Agreement No._____

Office: 1116 WALNUT ST
WEST BEND, WI 53095-3152
EMA IL: info@aalert.com
Phone: 262-338-6992

Beginning Class Date and time : _____

Traditional Class Living Word

Name: _____ **Date of Birth:** _____

Address: _____ **City :** _____ **State:** _____ **Zip:** _____

Phone: _____ **Parent's Names:** _____

I (we) herby make application to A-ALERT DRIVING SCHOOL

☐ **I agree to pay a fee of $435 for a complete course of driving instruction to include 30 hours of classroom instruction, 6 hours of behind-the-wheel instruction, and 6 hours of in-car observation. Payment of $ 435 due before classroom instruction. Additional behind-the-wheel instruction, if student requested at $50.00 per hour.**

The school will not refund any tuition or part of tuition if the school is ready, willing and able to fulfill its part of the agreement.Students can and will be dismissed from class for disruptive behavior, with no refund. A charge of $65.00 will be made for each BTW lesson missed which was not cancelled.

This agreement constitutes the entire contract between the school and the student, and no verbal statement of promises will be recognized.

Payment included check one:

☐ **I have paid Online or** ☐ **I am sending a Money Order Or Check with this contract.**

Signature of Student: _____

Signature of A-Alert Representative: _____

Signature of Parent: _____

Date: _____