

DOWER SCHOOL OF DRIVING

1114 11th Ave
Honolulu, HI 96816
Phone 735-1199

Registration and Agreement Form

Student's Name: _____
(last) (first) (middle)

Address: _____ City: _____ Zip: _____

Birth Date: _____ Age: ____ Male: ____ Female: ____ E-mail Address: _____

School: _____ Grade: _____ Applicant Contact #: _____

Parent(s) or Guardian Names: _____ Contact #: _____

Learner's Permit #: _____ Expiration Date: _____ Class #: _____

How did you hear about Dower School of Driving: _____

Classroom Attendance: Student must attend all 30 hours of classroom sessions and achieve a passing grade. No refund shall be given for any student that does not successfully complete the 30 hour course. An average score of 80% or more on exams and assignments is required to pass the Classroom Driver Education. A student with a failing score will not receive a certificate. No refund shall be given for any teen that fails the class.

Classroom Location: 1114 11th Ave, Kaimuki, Hi (Second floor).

Student Conduct: The student is required to wear dry pants, shorts, shirt and footwear. While on property students shall not smoke, use profanity, be disruptive, disrespectful, usage of alcohol or illegal substance. A violation of any of these rules can result in the student being rejected from class for the day. Fighting and more than one of these violations can result in immediate expulsion.

Behind-The-Wheel Training: (a) The student is required to attend all 6 hours of scheduled BTW sessions (b) Submitted to the instructor a notarized affidavit confirming 50 hours of additional drive time with a licensed driver, 21 or older (c) Have their driving permit on their person (d) If the student has an A restriction on their permit, have their corrective lenses on their person (e) Students with long hair must keep their hair from obstructing their vision.(f) Wear Shoes.
Remember your scheduled drive times, should you forget, you may be charged.

Lost Completion Certificates: Replacement Certificates costs \$25 each. To receive a replacement certificate provide a written explanation why you are requesting another certificate and payment to the instructor.

Cancellation: We reserve the right to cancel and/or change the class schedule.

Parent/Guardian: I have read and agree to all the terms stated in this Registration & Agreement Form. I certify that I am the Parent and or Guardian of the Student described on this form.

Parent/Guardian (print complete name): _____

Parent/Guardian Signature: _____ **Date:** _____

Student Rates:	\$400 Classroom and Behind-the-Wheel
	\$375 Classroom and Behind-the-Wheel, if you sign up with a friend
	\$150 Classroom Only
	\$300 Behind-the-Wheel Only
	\$40 Per Hour, Additional Behind-the-Wheel Session