

Brentwood Driver Training
Classroom Registration – Ezell Harding High School
(615) 373-5634
www.brentwooddrivertraining.com

The course consists of **30 hours classroom and 6 hours of behind-the-wheel instruction**. The entire course is completed in one week. The course fee is **\$425**. The course fee for Ezell-Harding students is **\$395**. Fees are to be paid in advance by mailing the fee with the form below. The classroom hours will be held on the Ezell Harding campus for *five* days from 8:30-4:00 (2:30 dismissal on Friday). The in-car driving will be done from class during class, with some lessons possibly after class.

Summer 2018 Ezell Harding High School

June 18-22 (Monday-Friday)

We will meet all days from **8:30-4:00** (2:30 dismissal on Friday).

- This course is good for an **insurance reduction**.
- You may test with us for your **license** (depending on eligibility).
- Two hours of behind-the-wheel training will be done on a simulator to learn emergency maneuvers, driving in inclement weather, etc.
- Student must bring a blue pen and non-spiral bound notebook.
- Students must know their social security number to complete paper work when testing for a license.
- Student should bring his/her lunch.

DO NOT DETACH

PLEASE PRINT LEGIBLY

Name _____ DOB ____ / ____ / ____ Phone _____
(Full Legal First & Last Name)

Address _____
(Street) (City) (State) (Zip Code)

E-mail Address _____
(to confirm enrollment)

High School you attend _____ Has Learner's Permit?: **Yes / No**
CIRCLE ONE
See driver's lic. page for eligibility.

Mail to:
Brentwood Driver Training
P.O. Box 922
Brentwood, TN 37024-0922

I have read and agree to the terms of this contract, and the permit/license requirements.

Parent Signature

Please pay with check, money order, or credit card
(\$10 processing fee when using credit card)

If paying by credit card, please enter the following information:

Card Type **Visa / MasterCard** Card # _____ Exp. _____
CIRCLE ONE Mo. Year

Cardholder Name _____ Cardholder Signature _____

If using a credit card, you can mail this form to the P.O. Box listed above **OR fax** to (615) 678-0100.

