Excel Driving School

Student Contract

Business Offices

4620 Dixie Hwy. Suite A
Waterford, MI 48329
(248) 618-3816

Student Name:_____
First Middle Last

Address:_____
Street City State Zip Code

Phone:_____ Date Of Birth: _____/_____/_____

Emergency Contact:_____ Phone #:_____

Class # _____ Location:_____ Start Date: _____ End Date: _____

Please select the desired service

____ **Segment 1** **Location:**_____**Price:**_____
Segment 1 consists of 24 hours of classroom, 4 hours of observation and 6 hours of on road coaching. A payment equal to half the full tuition is due the first night of class in cash, check or credit card. The remaining balance must be paid in full before the class ends in order to receive a completion certificate.

____ **Segment 2** **$40.00**
Segment 2 consists of 6 hours classroom instruction. A tuition fee of $40.00 is due in full on the first night of class. Tuition must be paid in full to receive a completion certificate.

(Segment 2 only) Permit #:_____Expiration Date:_____

Excel Driving School will not refund any fee, tuition, charges or any other part thereof should the school be able to fulfill its part of the service. Postponement or cancellation of any on the road coaching (ORC) session must be made with in 24 hours of the scheduled appointment to an employee of said school or the student will be charged a $ 30 fee. This fee shall be paid in full before any additional ORC is received. All fees and tuitions must be paid in full before the last day of class or a $25.00 late charge will apply. Any account 30 days past due will be charged a 3% finance charge per month until paid in full. Excel Driving School reserves the right to cancel, postpone or reschedule classes or lessons at its sole discretion.

Student: _____ Date: _____

Parent/Guardian: _____ Date: _____

Excel Driving School Rachel R. Duncan, Owner Date: _____

Notice: This school is required to be licensed by the Michigan Department of State, Driver Training and Testing division. If you have a complaint that you cannot settle with this school write: Michigan Department of State, Driver Training and Testing Division, P.O. Box 30640, Lansing, Michigan 48909-8140. Completion of a driver-training course does not guarantee qualification for a driver License. License # P000207

The driving record of each individual instructor is available for review upon request.
Business office hours 10:00 – 4:00 Monday-Friday
Copies of this contract provided upon request