## **Maverick Driving Academy**

"Changing Driver Behavior"
1237 Mt. Zion Road Spartanburg, SC 29303
864-908-7015 or 864-921-6641

## STUDENT REGISTRATION

Last Name	First Na	First Name	
Address	City	State	Zip Code
Home Phone#:	Cell #:	Beginners Permit #:	
School Attending:	hool Attending: Email Address:		
	STUDENT INFO	RMATION	
Requirements: Students will be however no student will be allo must have in their possession w  Tuition and Fees: The fee for of driving (generally three (3) rescheduled and subject to a strescheduled. All fess must be pechecks.  Refunds: After completion of the given for any remaining behind the course Certificate: Students receive a certificate from the struccessful completion of a driver.	be accepted into the program at the age wed to operate a motor vehicle until the while driving, any corrective lenses required. It hours of instruction is \$300.00. The poly, two (2) hour driving sessions). Stud \$25.00 rescheduling fee. Any applicate paid in full prior to receiving driving compared in the sense of th	Student/F  of 14 years and 10 months for the y have reached their 15 <sup>th</sup> birthday. A red by the Department of Motor Veh program includes an 8-hour classroom lents who do not show up for theighter rescheduling fee must be paid pertificate. There will be a \$35.00 sets are not eligible for a refund. However of instruction offered by Maverithe South Carolina Department of	8-hour classroom session; s required by law, students icles.  m session and six (6) hours r scheduled drive will be prior to the student being ervice fee for any returned ever, a prorated refund may ck Driving Academy will Motor Vehicles, showing
	Fort it takes to become a good driver. I use ill dedicate myself and make time to provide Staff.		
	Student S	Signature	Date
		r agree to practice driving with my	child whenever possible to
	Parent/Guardian	Signature	Date
I consent to have Maverick driv	Third Party Tring Academy provide the "Third Party Tring Academy Provide the "Third Party Tring Party	Testing" upon completion of the clas	
	Parent/Guardian Signature	I	Date
	Owner _	I	Date

(Please Note: The training vehicle has a standard automatic transmission and a dual brake control system.)