

# Driver's Education Sign-up Sheet



## Brookline Driving School, Inc.

167 COREY ROAD \* SUITE 201 \* BRIGHTON, MASSACHUSETTS \* 02135  
TELEPHONE (617)232-9400 \* FAX (781)455-9292

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (Eve.): \_\_\_\_\_ Phone (Cell): \_\_\_\_\_

Parent's Name: \_\_\_\_\_ High School: \_\_\_\_\_

Learner's Permit # (if you have one already): S\_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_

**Please select class session: Please note that the classes will be filled on a first-come first-served basis.**

Course Starting Date \_\_\_\_\_

***The fee of \$595 is due at time of registration. Checks should be made payable to Brookline Driving School.***

*Please note that parent is required to attend one 2-hour parent session.*

### **Contract (Below)**

A parent must sign the contract section below. This will certify that the parent is aware that 24-hour cancellation notice is required for all on-the-road lessons, including both driving and observation instruction in the car ( Friday notice must be given for weekend or Monday lessons). There will be a penalty fee of \$35 per hour when lessons are cancelled or missed without the 24-hour notice.

I have read and agree with these terms: \_\_\_\_\_

*Parent Signature (Required)*

Parent Name: \_\_\_\_\_

( Fax this Sheet to Brookline Driving School (781)455-9292, or mail it to 167 Corey road, Suite 201, Brighton MA 02135)