14 hr. Contract
HEAD START DRIVING, LLC.
Call/Text David Pickett 318-245-6566

It is hereby acknowledged on this date _____/_____/_____ an agreement has been signed between HEAD START DRIVING,LLC. and _____(Student), for the purpose of 6 Hours Classroom Drivers Ed Instruction and 8 Hours Behind the Wheel Training (Minimum of (2) 4 Hour Appointments)

Please Print Clearly & Read an Initial Below:

STUDENT: _____AGE_____DOB_____

ADDRESS:_____

CITY:_____STATE:_____ZIP_____

HOME #_____CELL#_____WORK#_____

EMAIL:_____

_____**I attest that as of this date I am 18 years old or older.**

_____**I acknowledge that the total fee to take this class is $325.00**. This fee can be paid at one time or divided into payments as follows: $200.00 deposit to take the 6 hour classroom instruction, payment of $125.00 due upon the first 4 hours of driving.

_____**I acknowledge that I have 45 days from the date of this contract to successfully complete the classroom instruction, driving portion, and payments due.** If not completed in 45 days the deposit or any payments received **will not be refunded**. It is my responsibility to schedule driving times with my instructor and pay my balance.

_____I acknowledge that if I schedule an appointment to drive, I must cancel the appointment within 24 hrs. If I do cancel the appointment and I am a **"no show" I will be charged a $50.00 extra fee.** The instructor will wait no more than 15 minutes before I am considered a "no show". **I MUST BE ON TIME FOR DRIVING APPOINTMENTS.**

_____I acknowledge this Class is a Study Course to prepare the student for driving on Louisiana Highways and Knowledge of Louisiana Laws. **This Class does not guarantee that the student will pass the state written test or obtain a driver's license.**
****At the end of this course we will give the State OMV Written Knowledge Test. A Score of 80 or above must be obtained to pass. If lower than an 80 is made, the student may retake the test once the same day. If still unsuccessful after the 2nd attempt, the student may call us and make an appointment to retest for a $25.00 fee. The student must pass the Written Knowledge test prior to starting the driving portion of this course.

(Over)

_____I acknowledge that after I have completed this 14 Hour Course, I have the option to pay an additional $40.00 to Third Party Test (TPT) and have the Driving School administer the OMV State Road Skills Test. **If I choose not to TPT, It is my responsibility to call and make an appointment to take the Road Skills test at the OMV. I will not get my license until I have completed the Road Skills Test.**

_____I acknowledge that after the 14 Hours Course is complete (Optional TPT), the Driving School will give the student the White Copy of Certificate of Completion, the State Test, and optional TPT Form in a Sealed Envelope to take to the OMV. This envelope must remain sealed and only opened by the OMV. **If this sealed envelope is lost, tampered with, damaged, or opened, it will be considered NULL and VOID and the Student will have to make an appointment with the Driving School and retake the State Test for a $25.00 Fee.**

STUDENT SIGNATURE_____DATE _____

(By Signing I agree and acknowledge all of the Above)

How did you find out about our class:

_____FRIEND/FAMILY _____DMV LIST_____FACEBOOK _____INTERNET

_____PAPER/MAGAZINE _____SCHOOL _____CABLE/TV:

OTHER:

COMMENTS/QUESTOINS: