

Date : _____

A-ALERT DRIVING SCHOOL, LLC

Agreement No. _____

Beginning Class Date and time : _____

Office: 1116 WALNUT ST
WEST BEND, WI 53095-3152

EMA IL: info@aalert.com

Behind the wheel only

Phone: 262-338-6992

Name: _____

Da te of Birth: _____

Address: _____ **City :** _____ **Sta te:** _____ **Zip:** _____

Phone: _____ **Pa rent's Names:** _____

I (we) hereby make application to A-ALERT DRIVING SCHOOL

I agree to pay a fee of \$395.00 for 6 hours of behind-the-wheel instruction and 6 hours in-car observation. Additional behind-the-wheel instruction, if student requested, at \$50.00 per hour. Classroom instruction was completed at .

I agree to pay a fee of \$500.00 for 9 hours of behind-the-wheel instruction. Additional behind-the-wheel instruction, if student requested, at \$50.00 per hour. Classroom instruction was completed at :

The school will not refund any tuition or part of tuition if the school is ready, willing and able to fulfill its part of the agreement. Students can and will be dismissed from class for disruptive behavior, with no refund. A charge of \$50.00 will be made for each BTW lesson missed which was not cancelled.

This agreement constitutes the entire contract between the school and the student, and no verbal statement of promises will be recognized.

Payment included check one:

I have paid Online or **I am sending a Money Order Or Check with this contract.**

Signature of Student:

Signature of A-Alert Representative:

Signature of Parent:

Date:
