



TEEN SEGMENT 2 CONTRACT

Life Driving Academy, LLC
50430 School House Road Suite 202 • Canton • MI • 48187
Phone: 248.880.8025 • Hours: Monday – Friday, 9:00 am – 5:00 pm

PROGRAM NUMBER

Student: High School:
First Middle Last

Address: City: Zip:

Phone: Email: D.O.B.:

Parent/Legal Guardian's Name: Parent's/Legal Guardian's Phone #:

Address: City: Zip:

Emergency Contact: Phone #:

Dates of Class: Time: Location: Course Fee: \$

TEEN SEGMENT 2 PROVISIONS

- 1 Life Driving Academy, LLC (LDA) will provide a minimum of 6 hours of classroom instruction...
2 Classroom instruction will not exceed 2 hours per day.
3 A driving log must be presented to verify that the student has completed a minimum of 30 hours of driving...
4 A log was presented to the Segment 2 instructor on or before the first classroom session.
5 The Student must have held a Level 1 License for not less than 3 continuous months.

TEEN SEGMENT 2 TERMS

- 1 The Parent or Legal Guardian agrees to pay the total course fee on or before the first day of class.
2 Due to the brief length of Segment 2, students are not allowed to miss any class time.
3 If student fails LDA will offer an opportunity for the Student to have refresher classes.

REQUIREMENTS TO PASS THE COURSE

- 1 The Student must complete all assignments, reading, pass quizzes/exam and fulfill State's class requirement listed above.
2 The Student will be allowed up to three attempts to pass the State Exam, which requires a score of 70% or higher.
3 If student fails LDA will offer an opportunity for the Student to have refresher classes.

REFUND POLICY

- 1 No refunds will be given after the first full day of class.
2 Refunds will be processed in full if a class/service is canceled by LDA.
3 No refund will be issued if the student is expelled due to disciplinary reasons.
4 There will be a \$30 return check fee for all returned checks.
5 We accept cash, checks, or credit cards.

I have read and understand the above policies and procedures for my child to take part in this program provided by LDA. The undersigned agrees to pay the amount of the course which needs to be paid before the 1st day of class.

ACCOMMODATIONS/MEDICAL CONDITIONS

Does the Student require any special accommodations to participate in the classroom phase (e.g, test being read, interpreter, etc.)?

Yes No If Yes, please explain:

Date: Student Name: Signature:

Date: Parent/LG Name: Signature:

Date: Provider Name: Life Driving Academy, LLC Signature: Title: President