

Driver's Education Registration Form

Registration is not complete without payment. Early registration is encouraged to ensure adequate enrollment and space availability.

STUDENT INFORMATON:

Student FULL Legal Name (as it appears on license)				
Driver's permit/License number (required)		Date of Birth (mm/dd/yyyy)		
Address		_ City	Ziŗ)
Phone	_ Student Email			
High School				
PARENT/GUARDIAN INFORMATION:				
Parent's Name(s)				
Parent's Address (if different)				
Parent's Phone				
Parent's Email				
REQUESTED COURSE:				
36 Hour Drivers Education	6 Hour Drive	Only	Private Driving Lessons	3
REQUESTED COURSE DAT	E :			

PAYMENT OPTIONS: (please choose ONE of the following)

GDEC Scholarship Approval - Voucher ID #_____ Voucher email must be sent directly to <u>driversed@centralgatech.edu</u>

----OR-----

Payment Options for Non-Grant Funded Registration made to CGTC Cashier Cash Check Money Order Credit Card

CANCELLATION POLICY: A full refund of tuition will be given to paid students provided that we receive notice of cancellation at least 24 hours prior to the first class. No refund will be given after the start of class. Students who fail to show for class without canceling will be responsible for payment and are not entitled to a refund.