

2019 SUMMER DRIVER EDUCATION APPLICATION

JOINT PROGRAM – ROSEVILLE AREA HIGH SCHOOL and DRIVER’S EDUCATION INC.

Your name must be exactly as it is on your Birth Certificate. The state has adopted strict identification requirements. Students will be asked to produce an official United States Birth Certificate, a State ID, an unexpired United States Passport, or Immigration Papers in order to take a permit test on the last day of class. You will get more information on this during the first day of class, but please prepare in advance.

Please PRINT your Full/Legal Name and Current Information:

<hr/> Last Name	<hr/> Complete First Name	<hr/> Middle Name	
<hr/> Street Address	<hr/> City	<hr/> Zip	
<hr/> () Home Phone	<hr/> Grade	<hr/> Date of Birth	<hr/> Current School

You may register up to the day of the class provided there are still openings available. However, classes are limited, so sign up early. Classes are held at RAHS and are held during actual school days only.

Mark your Desired Session:

<hr/>	Summer Session 1	Monday thru Friday, June 10 – 21, 8:00AM-11:00AM
<hr/>	Summer Session 2	Monday thru Friday, June 10 – 21, 11:00AM-2:00PM
<hr/>	Summer Session 3	Monday thru Friday, July 8 - 19, 8:00AM-11:00AM
<hr/>	Summer Session 4	Monday thru Friday, July 8 - 19, 11:00AM-2:00PM

Each session consists of 10 classroom days with the permit exam to be taken at school on the last day. YOU MUST ATTEND EVERYDAY!!!

Mark your Desired Payment Plan:

<hr/>	\$365.00 = Full Payment for 30 Classroom Hours and 6 Behind-the-Wheel Hours (Make check payable to Roseville Area High School or RAHS for full amount.)
<hr/>	\$200.00 = Partial Payment with the balance due at the first behind-the-wheel Training. (Payment is made to Driver’s Education Inc. for balance owed.)

Registrations and payment can be mailed to:

Roseville Area High School
Attn: Natalie Crosby
1240 County Rd B2 W
Roseville, MN 55113

Parental Approval for Driving Practice:

I hereby give my consent for _____ to take Driver Education in a dual brake controlled driver education car, under the guidance of a state certified driver education teacher.

Date _____ Signature of Parent/Guardian _____

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Activities Office Only: Cash Amount \$ _____ Check# _____ Entered in FeePay/Roster _____