******KWES Driving School Registration

Application Information

First Name: Click or tap here to enter text.

Last Name: Click or tap here to enter text.

Middle Initial: Click or tap here to enter text.

Date: Click or tap to enter a date.

Address: Click or tap here to enter text.

City: Click or tap here to enter text.

Prov: Click or tap here to enter text.

Postal Code: Click or tap here to enter text.

Home Phone: Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: Click or tap here to enter text.

Email: Click or tap here to enter text.

Date Available: Click or tap to enter a date.

Driver’s License #: Click or tap here to enter text.

Have You Booked your Road Test? Click or tap here to enter text.

If Yes When? \_\_\_\_\_Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any Medical Conditions to be aware of?

If Yes, Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: Click or tap here to enter text.

Type Of License You’re Going For. “Learners” [ ]  “Novice” [ ]  “Class 5”[ ]

|  |
| --- |
| Driving Experience |

Do You Require Pick Up or Drop Off? Drop off. Yes [ ]  No [ ]

|  |
| --- |
| Disclaimer and Signature |

I Certify That the Above Information Is Correct. I Understand That I Am to Give the Driving School 24 Hour Notice If Rebooking in Car Training or I Will Be Billed 50% Of My Lesson Cost. I Also Acknowledge That Driving Lessons with The Driving School Does Not Guarantee Passing of My Road Test.

Student Signature: \_Click or tap here to enter text.\_\_\_\_\_\_\_\_ Date: \_\_Click or tap to enter a date.\_\_\_\_\_\_\_\_\_

Parent Signature: Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_ Date: \_Click or tap to enter a date.\_\_\_\_\_\_\_\_\_\_

Instructor Signature: Click or tap here to enter text.\_\_\_\_\_\_\_ Date: \_Click or tap to enter a date.\_\_\_\_\_\_\_\_\_\_\_