

**Community Education**  
Mountain Lake Public School  
450 12<sup>th</sup> Street, Mountain Lake, MN 56159  
507-427-2325 ext. 5

## Drivers Training Registration – June – 2017

1. **Student's Legal Name** as it appears on Birth Certificate: **(PLEASE PRINT)**

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

2. **DATE OF BIRTH** \_\_\_\_\_ **AGE** \_\_\_\_\_

3. **CONTACT INFORMATION:** Street Address \_\_\_\_\_ Mailing Address \_\_\_\_\_

**CITY/STATE/ZIP** \_\_\_\_\_

**PARENT /CELL** \_\_\_\_\_ **LANDLINE** \_\_\_\_\_ **STUDENT/CELL** \_\_\_\_\_

4. **FEE** for classroom and B-T-W - \$340 ( Need 10 registered to hold class) Make check out to Mountain Lake Public School/Memo Line – Drivers Training.

5. **Start date for Classroom Instruction:** June 5, 2017.

**B-T-W Instruction:** Begins when a student has a valid driving permit. Completion date for behind the wheel is 12 months from the issue date of the permit. Contact the Office/Behind - the Wheel Instructor when you receive permit.

6. **Attendance** for all hours is mandatory. Students wanting to take this class need to make this their priority. Make – up classes will not be an option.

7. **Parent Only Meeting is Monday, May 23 from 5:30 – 7:00 pm. - Meeting held in Mrs. Kunkel's room # 432. (Use Elem. Library Doors)**

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We agree to the following terms and conditions described above:

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT NAME (PRINT) \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

A parent/guardian will attend the parent meeting. \_\_\_\_yes \_\_\_\_no

**\*Return this form to Lois in the Superintendent's Office.\***