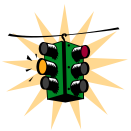
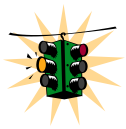


Preferred Driving & Testing, Inc.

517 Lovett Street Suite 10 Charlotte, MI 48813
www.preferreddriving.com (517)541-3421 (800)687-3002



Office Hours: Monday – Thursday 3:30 p.m.to 6:30 p.m. Department of State Certification #P000181

SEGMENT II CONTRACT

Class meets on Monday thru Wednesday from 4:00 to 6:00 pm
Learners permit from the Secretary of State needs to be shown the first day of class.

Program #_____ Classroom Location ***517 Lovett St Suite 10 ~ Charlotte, MI 48813***

Student Full Name_____ Phone_____

Date of birth_____ Dates of class: _____ Level 1 license issue date: _____

Address_____ City_____ Zip_____

Parent/Guardian_____ Phone (home)_____ (cell/work)_____

Address_____ City_____ Zip_____

COURSE PROVISIONS

Preferred Driving & Testing will provide 6 hours of classroom instruction provided by a certified instructor.

NOTICE: This driver education provider is required to be certified by the Secretary of State. If you have any complaint that cannot be settled with the provider, please complete the Driver Education Complaint form found under "Driver Programs Division" on the Department of State website;www.michigan.gov/sos. Completing driver education does not guarantee a driver's license.

For a student to participate in Segment II, verification must be received that the student has completed a minimum of 30 hours of driving (including 2 hours at night) with a licensed parent or guardian (or parent designee) on a Level 1 License, which has been held for not less than 3 continuous months.

TERMS

1. The parent or guardian agrees to pay the amount of $80.00 which needs to be paid in full on the first day of Segment II.
2. Student is required to meet the state requirements to pass the course which include passing a written exam and attending all classes.
3. All necessary materials and supplies are provided by Preferred Driving and Testing at no additional cost.
4. Absence or tardiness will not be tolerated, and no make-up times will be available. Student will be required to enroll and pay for a future course if class is missed for any reason.
5. A $50.00 fee will be charged on any NSF check that is returned by a lending institution.
6. Fee for issuing a replacement certificate is $10.00.

REFUND POLICY

No refunds will be issued for a student failing to complete class requirements or those removed from the program for absence, tardiness, or classroom behavior.

INJURY CONSENT: In the event of injury or illness while under the supervision of the driving school instructor your signature below will provide permission for any necessary medical treatment to be given. Parents will be immediately notified, however this may be after emergency personnel is contacted depending on the severity of the emergency.

Physicians Name_____ Phone_____

_____ _____
Student Signature Parent or Guardian Signature

_____ _____
School Representative Signature Date

Segment II is $ 80.00 • Cash is preferred
Make check / money orders payable to: Preferred Driving & Testing, Inc.