

# CHRISTIAN DRIVING SCHOOL

## DRIVER EDUCATION COURSE ENROLLMENT FORM

### 2017

- WHO:** Students must be and at least 15 years old. Students from public schools, private schools and home schools may enroll.
- WHEN:** Beginning TO BE ANNOUNCED  
In-Car (Student drive times will be scheduled with instructor)
- WHERE:** Community Christian School  
Room 135  
3106 Broce Drive  
Norman, Okla. 73072
- COST:** The cost of the course is \$340. A \$170 deposit is due at enrollment and the balance is due prior to the In-Class phase.  
There is a \$20.00 charge for failing to give advanced notice for driving session cancellations.  
There will also be a \$10.00 charge for replacing any lost diplomas.
- HOW:** Return this form with full payment or deposit to Community Christian School High School Office.  
**Attention:** Culley Seymour at the above address to confirm enrollment.
- WHY:** This course will teach a style of driving that develops decision-making qualities and performance of driving skills. The course consists of a comprehensive video and learner's guide program that is recognized for insurance discounts by major carriers nationwide. Please check with your insurance company for verification.
- TIME:** In-Class Phase: A full 10 hours of instruction.  
In-Car Phase: Each student will drive for a total of six hours behind the wheel covering all basic driving maneuvers. Monday through Saturday sessions are from 8:00-10:00, 10:00-12:00, 12:30-2:30 and 2:30-4:30.

Instructors: Culley Seymour and David L. Gaile. David is a graduate of Oklahoma State University, with a Bachelor of Science degree in Education specializing in Driver and Traffic Safety Education. Commercial Driver Training Private Instructor licensed by the Oklahoma Department of Public Safety. Defensive Driver Instructor certified by the National Safety Council. Motor Vehicle Accident Prevention Course Administrator/Instructor. Oklahoma District Driving Safety Instructor/Examiner for the United States Postal Service. Committed to saving lives both physically and spiritually with over thirty years of teaching experience.

*If you have any questions please call Culley Seymour at (405) 227-7257*

### CONTRACT

Print Student's Full Name:

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

Social Security Number \_\_\_\_\_

Birth date \_\_\_/\_\_\_/\_\_\_ Grade \_\_\_\_\_ Phone: \_\_\_\_\_ Summer Session

Amount paid \_\_\_\_\_ Date of payment \_\_\_/\_\_\_/\_\_\_ Person receiving money \_\_\_\_\_

By signing this document I am in agreement with the above payment conditions for the course content described.

Parent or Guardian signature: \_\_\_\_\_

Contract Number: \_\_\_\_\_ Instructor signature: \_\_\_\_\_