



# **ADULT DRIVING CONTRACT**

Office (by appt. only) 1011 S. Main St. Bldg B, Ann Arbor MI 48104

[www.allstardrivereducation.com](http://www.allstardrivereducation.com)

This contract is entered into by and between All Star Driver Education, Inc. (State License # 85B40) and

Name of Adult: (as it appears on birth certificate) **PLEASE PRINT CLEARLY**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Birth Date: \_\_\_\_\_ (mm/dd/yyyy)

TIP#: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ (mm/dd/yyyy)

The school shall provide behind the wheel instruction for a fee of \$\_\_\_\_\_ per hour, paid in advance or prior to driving. Adult students will be picked up at their residence. Instruction will cover the Driving Performance Rating Form and In The Car Checklist. All Star will provide a licensed instructor, vehicle, and fuel for the driving. **No instruction shall commence until the student has paid all fees in full, and the instructor has received a copy of his/her birth certificate.**

### **DRIVING TIMES**

Date_____	Time_____	Drivers Initials_____	Instr. Initials_____	Fee/Pd.\$_____
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**Make Up Days:** For appointments cancelled 24 hours in advance the student is obligated to call the instructor to reschedule the missed drive times. If the student does not cancel within 24 hours it is at the discretion of the instructor to allow for rescheduling of the missed drive time. For any and all no show appointments you, the student, will be charged the then current no show fee.

**NOTICE:** This school is required to be licensed by the Michigan Department of State, Driver Training and Testing Division. If you have a complaint which you cannot settle with this school, write: Michigan Department of State, Driver Training and Testing Division, Lansing, MI 48918. Completion of driver training instruction does not guarantee qualification for a driver license. The Driving Record for each individual instructor is available for review upon request.

Adult students must be aware that they are contracting us to instruct them on driving a car. The instruction they have contracted us for is not mandatory or required by the state. There are no tests, quizzes, or homework of any kind. There will only be behind the wheel instruction

**Refund Policy:** If an emergency presents itself a certain percentage of the prepaid fees remaining will be returned.

The undersigned has paid in the following form of payment:

Cash    Check    Money Order    Credit Card

In the amount of: \_\_\_\_\_

Date: \_\_\_\_\_ Adult Signature: \_\_\_\_\_

Date: \_\_\_\_\_ School Representatives Signature: \_\_\_\_\_

**RELEASE, ASSUMPTION OF RISK AND  
INDEMNIFICATION AGREEMENT**

**All Star Driver Education, Inc.**

In consideration of my participation in driving instruction and/or road testing and any and all events or activities in relation thereto (collectively the "Activity") permitted by All Star Driver Education, Inc. ("All Star") and with the understanding that my participation in the Activity is only on the condition that I enter into this agreement for myself, my heirs and assigns, I hereby assume the inherent and extraordinary risks involved in the Activity in which I may participate. I expressly assume the risk of and accept full responsibility for any and all injuries (including death), property damage and accidents which may occur as a result of my participation in the Activity and release from liability All Star, its and their officers, directors, agents, representatives, heirs and employees. I hereby waive any and all claims I may hereafter have as a result of any and all injuries disease or sickness (including death) to my person or property as a result of my participation in the Activity. I hereby agree to indemnify all of the above named persons for any and all claims, including attorney's fees and costs, which may be brought against any of them by anyone claiming to have been injured as a result of any injury, sickness or disease (including death) to me or my property which may occur as a result of or during the Activity. I understand that the Activity may be inherently dangerous and that physical injury, property damage or death may result. I certify that I have read and fully understand this release. I am of lawful age and legally competent to make this agreement. I understand that I am waiving any and all claims I may have against All Star, its officers, directors, agents, representatives, heirs and employees as the result of my participation in the Activity.

**THIS IS A RELEASE. READ CAREFULLY BEFORE SIGNING.**

Witness: \_\_\_\_\_

Dated: \_\_\_\_\_

Signature:/s/ \_\_\_\_\_

Address: \_\_\_\_\_