



# Clearview Driving School Inc.

## Participation Agreement

I agree to provide your child with complete teen driver education in accordance with the requirements of the State Of Illinois. Our instructors are certified and specially trained to provide comprehensive and professional instruction. If there are any questions about the quality of our program, or the progress of your child, we encourage you to call, stop by the office, or sit in on one of the class sessions. We will try to answer any questions that you may have at that time.

Instructor/Owner \_\_\_\_\_

I agree to participate fully in Clearview Driving School's teen driver education program. I Promise to respect myself, my instructor (s), other students in the class, the facility in which I meet in for class, and the equipment and materials that are provided for educational purposes by the school.

I understand failure to do so may result in dismissal from the class and forfeiture of my tuition and completion form. I also realize I must provide evidence that I am currently enrolled in school and have passed at least eight courses for the previous two semesters, or be enrolled in a home school program, or apply for a waiver from the Superintendent of Schools.

Student signature \_\_\_\_\_

Date \_\_\_\_\_

I grant permission for my child to attend this class and participate in behind-the-wheel instruction. I promise to reinforce safe driving habits during regular practice with my child to the best of my ability. I understand my child must conduct him/her self respectfully as described above, or risk forfeiture of the tuition I've paid and getting a completion form sent in for their blue slip. I have also read and understand the above requirements for my child's school eligibility to be enrolled in this driving program.

Parent/Guardian signature \_\_\_\_\_

