

Scenic Valley Driving School

204 Mariahwynn Terrace, Lodi, WI, 53555 (608) 592-2182

Application and Agreement

Date _____ **Agreement Number (school use only)** _____

Contact Information:

Student's Name _____

Date of Birth _____ **Student's Phone** _____

Address _____

City _____ **State** _____ **Zip Code** _____

Parent's Name _____**Parent's Phone** _____

Parent's Email _____

Select Desired Course:

___ **Online Classroom Course** $95.00 (30 hours of Wisconsin DMV Approved Online Instruction)

___ **Behind-the-Wheel Course** $575.00 (12 hours of Wisconsin DMV Approved In-Car Instruction)

___ **Combined Online Course + Behind-the-Wheel Course** (1 payment of $625.00)

___ **Behind-the-Wheel Course** (3 payments of $225.00)

(Credit Card Required below: 1st payment with application, we will process the remaining payments in 30 & 60 days)

___ **Combined Online Course + Behind-the-Wheel Course** (3 payments of $250.00)

(Credit Card Required below: 1st payment with application, we will process the remaining payments in 30 & 60 days)

___ **Private Driving Lessons** $125.00 per hour (I desire _____ hours of Private Instruction)

Select Payment Method:

___ **Check Enclosed** (Preferred method of payment, $50 NSF fee applies)

___ **Invoice** (Please send an invoice to my email address listed above)

___ **Paid Online** (I paid the fee at www.ScenicValleyDrivingSchool.net)

___ **Installments (Card #_____ Exp. _____ CVV _____**

I agree to pay the total fee for the above selected course and understand that I will be billed $50.00 if the student misses a scheduled driving lesson. I also understand and agree that the school will not refund any tuition or part of tuition if the school is ready, willing and able to fulfill it's part of this agreement. This constitutes the entire agreement between the school and the student, and no verbal statement or promise will be recognized.

_____ _____ _____

Student's Signature Parent's Signature Driving School Signature