

JDS CAROLINAS, INC.

P0 Box 143 Vanceboro, NC 28586 Local: (252) 244-1220 Fax: (252) 244-0326

E-Mail: jdsvanceboro@gmail.com Website: www.JDSCarolinas.com

TEEN PRIVATE DRIVER EDUCATION

This contract is made and entered into by and between JDS Carolinas, Inc., hereinafter called the Instructor and the Student:

Name (Please PRINT):	
Address:	
Date of Birth: School Attending:	
City, State, Zip Code:	
Parent Phone: () Student Phone: ()	
Student Email Address:	
Parent Email Address:	
Parent Signature:	
JDS Carolinas, Inc provides the following services along with the price Please check off which service you are signing up for O - 30 hours of Classroom instruction + 6 hours Behind-the	•
COMPLETE PROGRAM	\$525
O - 30 hours of Classroom instruction only	\$300
O - 6 hours of Behind-the-Wheel instruction only	\$425
O - Extra Teen Driving : Hours NC PERMIT REQUIRED PRIOR TO SCHEDULING EXTRA LESSONS NC Permit Number:	\$125 per hour

NOTE: PLEASE READ CAREFULLY and initial bottom of this page.

The Instructor and the Student agree to the following terms and conditions:

- 1. No Certificate of Completion will be issued until all fees are paid.
- 2. The Instructor will complete the course within a reasonable amount of time: delays caused by mechanical failure, unsafe driving conditions due to adverse weather or any other reason over which it has no control, the Instructor will not be held responsible.
- 3. In the operation of a motor vehicle, there are certain hazards and risks. The Student does hereby specifically assume all such risks as may be incurred in the normal operation of a motor vehicle during course of instruction. Each Instructor vehicle is fully insured with liability coverage in the amount of \$100,000/\$300,000/\$50,000. The Student agrees to completely release the Instructor and its associates from any liability and all claims or courses of action resulting and arising from damages or injuries suffered by the Student during this course to the extent that claims shall not be covered by the Instructor insurance coverage.
- 4. An additional fee of \$25 will apply (once per contract) if Student requests to be picked up at home or other address beyond a reasonable distance from the assigned instructor.
- 5. Dates and times for classroom and in-car instruction will be given to the Student in advance and adhered. In the event of unforeseen contingencies, the Instructor may make changes as far in advance as possible (no less than 24-hour notice) and all parties notified by telephone or inperson. The Instructor requires 24-hours' notice by the Student to cancel a scheduled appointment. Instructional materials will be provided by the Instructor for the Student's use. The materials will remain the property of the Instructor.
- 6. The Instructor cannot and does not guarantee that the Student, upon completion of the course, will successfully pass the examinations given by the Division of Motor Vehicles or that the Student will pass the driving test. The Instructor does agree to exert its best efforts in teaching the Student to meet the requirement of the Division of Motor Vehicles.
- 7. This contract constitutes the entire agreement between the Student and the Instructor. Verbal assurances or promises not contained herein are not binding in any way on the Instructor or the Student.

I have read the above terms carefully and completely. ____ Initial Here

Complete and return with payment as instructed below:

If mailing, send to the address below: JDS CAROLINAS, Inc. PO Box 143 Vanceboro, NC 28586

PAYMENT METHODS ACCEPTED: Personal Check, Cashier Check, Money Order, Card Payment, Venmo

If emailing contract, send to: jdsvanceboro@gmail.com
If faxing, dial (252) 244-0326

Please include Debit or Credit Card Information below. If paying by Venmo, send payment to @Edwin-Jordan-1

CHECK	APPR	WPK	IAIC	DEFE	IN:

- O Complete Teen Course: \$525.00
- O Teen Classroom Only: \$300.00
- O Teen 6 Hours Behind-the-Wheel Only: \$425.00)
- O Extra Behind-the-Wheel Driving: ____ Hours x \$125.00

Student Signature:	_ Date:
Parent/Guardian Signature:	Date:
Debit/Credit Card Authorization (MASTERCARD OR VISA ONLY : WE [OO NOT ACCEPT AMEX)
Name on Card:	
Billing Address:	
Amount to Charge: \$	
Card Number:	
Expiration Date:	
CVV Security Code (last 3 digits on back of card):	

Release for Behind the Wheel Instruction
I,, Parent/Guardian of, Student, certify that I am releasing my child from, School System, for the purpose of Drivers Education Instruction, specifically for classroom and/or behind the wheel driving. I am electing to privately pay for behind the wheel instruction with JDS of the Carolinas.
COVID 19 Protocol and Release
I have received a copy of JDS of the Carolinas' protocol for COVID 19.
I have been informed of the processes that are in place by JDS of the Carolinas and their contracted instructors.
To ensure the safety of both the student and instructors all procedures must be adhered to. By signing this statement, I am agreeing to comply with all of the COVID 19 procedures, and I am releasing JDS of the Carolinas from any liability in connection with COVID 19.
This the date of
(Parent/Guardian Signature)
(Student Signature)