## Permission for Behind the Wheel

Aim High Driving School LLC, 515 S. Main St., Rocky Mount, VA 24151 / 302 S. Locust St. Suite #1, Floyd, VA (540) 904-7381

Student's Full Nam	ne:				
	First		Middle	Last	
Home Address:					
Number			Street		
	City	State		ZIP	
Date of Birth:					
Learner's Permit #	:				
Date Issued:					
Home Phone:			Emergency #:		
School Attending:			Grade Level:		
WITH THE UNDERSTAN ENTIRE COURSE. I ALS FOR TRANSPORTATION STUDENT WILL PASS T THAT THE STUDENT W PROMOTING TRANSPO	NDING HE/SHE WILL BE UNDER O GIVE PERMISSION FOR MY S N PURPOSES AND/OR INDIVIDU HE STATE DRIVER'S LICENSE EX ILL BE GUARANTEED EMPLOYN DRTATION SAFETY THROUGH T ERNS ABOUT THIS COURSE, CA	THE SUPERVISI ON/DAUGHTER IAL ONE ON ON AMINATION, OI /IENT UPON CO HE CERTIFICATION	ON OF AIM HIGH DRI TO BE IN THE CAR ON E INSTRUCTION. THIS R THAT THE STUDENT MPLETION OF COURSE ON OF QUALITY TRAIN	ING PROGRAMS. IF YOU HAVE	
Date		Parent/Guardian Signature			
Date		Student Signature			
Behind the Wheel	\$275.00				
	This Contract	Begins Wher	n Signed And Date	d	
		Owner/Ope		_	
	s or tuition or any part of Ind willing to perform its	-	•	ed upon request unless the asonable time period.	

updated 6.20.17