



# "DRIVING STUDENTS INTO THE FUTURE"

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## ENROLLMENT FORM PLEASE FILL OUT ALL INFORMATION

### STUDENT NAME AND INFORMATION

LAST NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_ ZIP  
CODE: \_\_\_\_\_

PHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_

DRIVER INSTRUCTION PERMIT #: \_\_\_\_\_

SCHOOL CURRENTLY  
ATTENDING: \_\_\_\_\_

INDICATE WHICH MONTH YOU ARE SIGNING UP FOR: \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_ CELL#: \_\_\_\_\_

WORK PHONE #: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

DOCTOR: \_\_\_\_\_ PHONE #: \_\_\_\_\_

HOSPITAL: \_\_\_\_\_

By signing below you understand that Deluxe Driving Academy, L.L.C. assumes no liability whatsoever of negative driving issues or outcomes by the student during or after the completion of this class. We promote and teach safe driving principals, however it is the ultimate responsibility of the parent(s) to ensure their child is ready and capable of receiving a drivers license.

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_