



## NYS DRIVER EDUCATION CLASS REGISTRATION

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_  
\_\_\_\_\_

**DOB** \_\_\_\_\_ *Must be 16 years old to begin classes*

**PHONE** home \_\_\_\_\_ cell \_\_\_\_\_

**AMOUNT ENCLOSED (\$75 deposit required)** \_\_\_\_\_

**WEEKLY PAYMENT PLAN (\$50/week after deposit)** Yes \_\_\_\_\_ No \_\_\_\_\_

**DRIVING TIME PREFERENCE (if available)** 2:30-4:00 \_\_\_\_\_ 5:30-7:00 \_\_\_\_\_

I give my child permission to take part in the theory and driving classes offered by the Holy Cross Academy Driver Education Program. I understand that students must complete a total of 24 hours of class time and 24 hours of driving time to receive certification, and that they may be charged for additional make up classes.

**PARENT SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

***Space is limited! For more information call 315-363-1669***