

Excel Driving School

41-511 Inoa St.
Waimanalo, HI 96795
Office: 808-203-7940 call / text
exceldrivingschoolhi@gmail.com
www.exceldrivingschoolhi.com

Student Name: _____ Birthdate: _____

Address: _____ HI _____ Phone Number: _____
Street City Zip Code

High School: _____ Permit: Yes / No Email: _____
For email confirmation

Father / Guardian: _____ Mother / Guardian: _____
Name and Phone (if applicable) Name and Phone (if applicable)

Class Session Requested _____

CLASSROOM ONLY + fees: \$225

Certificate will be issued after completion of 30 hours of classroom instruction.

CLASSROOM + BEHIND THE WHEEL PACKAGE: \$455 - \$50 Discount = \$405 + fees: \$425

Certificate will be issued after completion of 30 hours of classroom instruction, 6 hours BTW, and submission of notarized driving log.

Policy and Fees:

Mail completed application to the above address along with full payment in cash or check. Please make check payable to Excel Driving School. There will be a \$50 fee for returned checks. Confirmation will be by mail or phone, or include email for email confirmations.

Withdrawal and Refunds: Full refund will be given if notified more than 5 days of the first day of class, less \$50 handling fee. No refunds will be given within 5 days of the first day of class and no refunds once class begins.

BTW lessons will begin after the Classroom session is complete. A permit is required. The driving instructor must be given a 24 hour cancellation notice or a \$50 cancellation fee will apply.

Excel Driving School may cancel or make changes to the scheduled classes due to low enrollment.

I agree to the above policy and fees. I authorize my son/daughter _____ to enroll with Excel Driving School.

Father/Guardian Signature: _____ Date: _____

OR

Mother/Guardian Signature: _____ Date: _____

For Office: Date Received _____ Amount _____ Check # _____ Confirmation Sent _____
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