

Maine South High School – Summer Driver Education 2016

1111 South Dee Road, Park Ridge, Illinois 60068 • Main Number: 847.825.7711 • Summer School Number: 847.692.8217
Dave Berendt, Driver Education Director • Marcy Petersen, Summer School Registrar

Students must be 15 before May 1, 2016

Registration deadline: Friday, February 26, 2016

Tuition and fee information

Tuition is refundable **before** summer school begins. Refund checks will be processed in the bookstore and mailed to the current address on file within 8 to 10 weeks from the request. **Once class begins, tuition is not refundable. No refund or course credit will be given for any course dropped due to attendance or behavior issues. NO financial aid available for Summer Driver Education.**

STUDENT INFO – Please fill out completely and legibly

STUDENT LAST NAME: _____ FIRST NAME: _____

STUDENT ID#: _____ Check if non-District 207 student BIRTHDATE: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN EMAIL: _____

PARENT/GUARDIAN CONTACT PHONE NUMBER: _____

Course name	Course cost
Driver Education	\$350.00
7:30 a.m. – 10:30 a.m. 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd <input type="checkbox"/>	
10:30 a.m. – 1:30 p.m. 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd <input type="checkbox"/>	
1:30 p.m. – 4:30 p.m. 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd <input type="checkbox"/>	
Total amount due	\$350.00

A \$100 out-of-district surcharge will be added to all registrations for students not living in the District 207 attendance area.

PAYMENT INFORMATION:

Method of Payment (Please Check One)

Check Enclosed for \$350.00 made payable to *Maine South High School*

Credit Card Payment of \$350.00 (please check one and complete below): MasterCard Visa

Credit card number:

Expiration Date: /

Print name as it appears on credit card: _____

Classes will be closed when maximum enrollment is reached or February 26, whichever comes first.

Summer Driver Education Application

Print and fill out this form completely - it must accompany your registration form.

Return both forms to Mrs. Petersen in the Main Office no later than 3:30 p.m. on February 26, 2016.

 First Middle Last (Full name as on appears on birth certificate)

 Address City State Zip

County	Social Security #	Height Ft. In.	Weight	Eye Color	Sex	Date of Birth
Cook						
						School Code 0084

Parent/Guardian Name(s): _____

Telephone Number: _____ (check one) home cell work

Year in school **this year**: (check one) Fr. Soph. Jr. Sr.

ID Number: _____ Counselor: _____

Parent E-Mail Address: _____

Are you repeating Driver Education? No Yes

If yes, how many times did you fail? 1 2 3

Please indicate your preferred class time (1st, 2nd, 3rd choice)

_____ 7:30 a.m. – 10:30 a.m.

_____ 10:30 a.m. – 1:30 p.m.

_____ 1:30 p.m. – 4:30 p.m.

School currently attending (if other than Maine South): _____

Driver's Permit/License Number	Period
License Class	Group
Restriction	Class Inst.
THIS AREA FOR OFFICE USE ONLY	BTW Inst.