

WINTER DRIVER EDUCATION REGISTRATION FORM

Please print clearly so we can read your form

To fill out this form electronically, please make a **copy** to edit.

Bring this form with you to the in-person registration on

Wednesday, January 21. There is no pre-registration.

FULL NAME _____

ADDRESS _____

DATE OF BIRTH _____ (NOT 2026)

PHONE(S) (CELL) _____

(HOME) _____

YOUR (SCHOOL) EMAIL _____

CAREGIVER EMAIL _____

DO YOU HAVE YOUR LEARNER'S PERMIT: YES / NO

(If you received it, please bring proof with you on 1/21/26)

YEAR OF GRADUATION _____

CLASSES MEET ON **MONDAYS AND WEDNESDAYS**. ARE YOU
AVAILABLE BOTH DAYS? YES / NO (circle one)

**BRING THIS FORM TO THE AUTO GARAGE ON 1/21/26 AT 3:05 P.M. FOR
REGISTRATION WITH A \$750 PERSONAL CHECK PAYABLE TO CRLS DRIVER
EDUCATION. (Money Orders cannot be accepted)**