

Please sign and return with your son or daughter either on the first day of class or on their first drive, whichever comes first. Thank you!



DRIVING WAIVER

I, _____, (father, mother,
or guardian) of _____,

acknowledge there are occasions that arise in which a student is unable to make their drive due to an illness or an unavoidable circumstance. This leaves the other student without a driving partner. There are also occasions when students either need to drive to or be picked up from a destination other than the assigned location. This situation can cause only one student to be in the car with the Right Way driving instructor for a short period of time while either driving to or driving back from the accommodated location.

I give permission for my son or daughter to drive if such occasions should arise during their driving session.

(Signature Please)

(Today's Date)

(Please list student's cell phone number in case the instructor would need to communicate with student prior to their drive time.)