

Barry Driving School, LLC  
DBA: Green Light Driving Academy  
P.O. Box 58  
101 W State St.  
Hastings, MI 49058

Office Hours: By Appointment  
517-852-0000

Provider Certificate #P000727

### SEGMENT 1 CONTRACT

Program Number: \_\_\_\_\_ Class Start Date \_\_\_\_\_

Student Name: \_\_\_\_\_  
(As reported on Birth Certificate) Last First Middle (full name) Date of Birth  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Student Phone: \_\_\_\_\_ (Home/Cell) Email: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Parent/Guardian Phone: \_\_\_\_\_

Parent/Guardian Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact (other than parent) \_\_\_\_\_  
Name/phone number

Classroom location: 101 W. State St., Hastings, MI 49058

### Course Provisions

- Green Light Driving Academy will provide a minimum of 24 hours of classroom instruction, 6 hours of behind-the-wheel (BTW) instruction and 4 hours of observation time with a certified Michigan Driver Education Instructor.
- Classroom instruction must be a minimum of 3 weeks in length and shall not exceed 2 hours per day. BTW instruction shall not begin until the student has received a minimum of 4 hours of classroom instruction and must be completed no later than 3 weeks after the classroom instruction has been completed.
- The Student must be at least 14-years and 8-months of age by the first day of a Segment 1 course. Verification by birth certificates is required.
- Green Light Driving Academy will conduct the BTW instruction in a dual-controlled automobile that is insured by the Provider to cover each student enrolled in the program.

All Dates for the course: \_\_\_\_\_  
Classroom times: \_\_\_\_\_

### Course Terms

- The Parent or Legal Guardian agrees to pay the total amount of \$450, by the first day of class in the form of credit card, check, cash, or money order
- A textbook will be provided for your use. If the book is not returned, a \$25 fee will be issued
- Students must be on time for all classroom sessions and driving appointments. Tardiness or failure to show up will not be tolerated and may result in a dismissal from class. The Student may miss class only for an illness or emergency with documented proof presented to the instructor. Any missed class time must be made up. The student is required to make up the same class session missed (e.g., The student missed day 5 and must attend day 5 of the next available segment 1 course.)\*
- Students must obtain a score of 70 percent or better for classroom assignments and tests Missing and/or incomplete assignments may result in automatic failure of class. Students will not be able to take the State exam unless all classroom work is completed. Students must participate in class discussions, activities, and complete all work on time.
- **The Student will be allowed up to 2 retakes; a total of three attempts but not required, to pass the State Exam, which requires a score of at least 70%.** If the student does not pass, they will have to take Segment 1 over again. Students needing to retake the class will be required to pay the full fee.
- Cell phone use is prohibited while in the class or in the car.
- **Missed driving appointments without prior (24 hour) notification will result in a \$25 rescheduling fee.** Emergency situations will be determined on an individual basis.
- Should additional drives be required a \$25 per hour fee may be assessed.

**REFUND POLICY**

- Should you decide for any reason to withdraw from the program within 24 hours or the first 2 days of classroom instruction, your fee, less \$50 will be fully refunded. If you withdraw after the first 2 days, no refund will be given. NO REFUNDS WILL BE ISSUED UNTIL ALL SUPPLIES ARE RETURNED TO THE INSTRUCTOR.
- Should you decide to withdraw from the program with more than 24 hours' notice, your fee, less \$25 will be fully refunded.
- To request a program change without penalty, a 2-week notice must be given otherwise a \$25 transfer fee will be issued.
- Emergency situations will be determined on an individual basis by Green Light Driving academy.

**Health Screening**

1. Does the student require any special accommodations to participate in this class (i.e., test being read to him/her, interpreter, etc.)? Yes \_\_\_\_\_ No \_\_\_\_\_
  - a. If Yes, please explain \_\_\_\_\_
2. Does the Student require any special accommodations to participate in the BTW phase (e.g., adaptive devices, interpreter, etc.)? Yes \_\_\_\_\_ No \_\_\_\_\_
  - a. If Yes, please explain: \_\_\_\_\_
3. Are there any medical conditions that would pose a concern with the student's classroom or behind the wheel instruction (adaptive devices, interpreter, epilepsy, color blind, allergies, autism, etc.)? Yes \_\_\_\_\_ No \_\_\_\_\_
  - a. If Yes, please explain \_\_\_\_\_
4. Is the Student taking any medication that may affect their ability to drive a motor vehicle safely? Yes \_\_\_\_\_ No \_\_\_\_\_
  - a. If Yes, please explain: \_\_\_\_\_
5. In the past six months, has the student had a fainting spell, blackout, seizure, or other uncontrolled loss of consciousness? Yes \_\_\_\_\_ No \_\_\_\_\_
6. In the last six months has the Student had a physical or mental condition which would affect their ability to drive a motor vehicle? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Is the student's vision at least 20/40 with or without correction? Yes \_\_\_\_\_ No \_\_\_\_\_

**If the answer to any of the above questions is Yes, then the Parent/Guardian must provide a letter by the Student's physician indicating that the condition has been corrected and/or is under control and the Student meets the physical and mental requirements for a motor vehicle operator's license under Section 309 of the Michigan Vehicle Code 1949 PA 300, MCL 257.309**

**Vision Screening Test**

I, \_\_\_\_\_ have been administered a vision screening test on \_\_\_\_\_ by \_\_\_\_\_  
Student signature Date administered Instructor name

and received a visual acuity score of at least 20/40 corrected vision. This test is completed by a GLDA Instructor. We, the undersigned, have read and understand and will comply with the guidelines. We also certify that the health screening information is true and accurate to the best of our knowledge.

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This agreement takes precedence over any and all previous written agreements and/or oral understanding that either party may have signed or understood was to have been in place. It is expressly agreed that the Green Light Driving Academy and its instructors shall not be held liable for any injury sustained by students before, during, or after training. Student and parent agree to indemnify and hold harmless against all claims, damages, costs and expenses including attorney's fees arising from or in connection with said training. With the knowledge and understanding of all the above conditions, this party agrees to hereby sign said agreement.

\_\_\_\_\_  
Student Signature Date Parent or Guardian Signature Date

\_\_\_\_\_  
Provider's Authorized Official's Signature Date

**NOTICE** - This provider is required to be certified by the Secretary of State. If you have any complaint that cannot be settled with this provider, please complete the DES-P011 Statement of Complaint form found at: [www.michigan.gov/drivered](http://www.michigan.gov/drivered) . Completion of a driver education course does not guarantee qualification for a new driver License.

**Behind The Wheel Waiver:**

Section 33 (d) of the Driver Education Provider and Instructor Act requires that at least two students must be in a vehicle during BTW instruction unless a parent waives this requirement in writing.

I, the Parent/Legal Guardian of the Student waive the requirement. I understand that my son/daughter must still complete at least 4 hours of observation time as a passenger in a driver education vehicle being driven by another driver education student.

Date: \_\_\_\_\_ Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Patent/Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Provider's Authorized Official's Signature: \_\_\_\_\_