



This Contract binds:

Student Driver: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_  
Please Print

Parent/Guardian: \_\_\_\_\_  
Please Print

Parent/Guardian: \_\_\_\_\_  
Please Print

Parent Information:

Address: \_\_\_\_\_  
Street City State Zip Code

Phone: \_\_\_\_\_  
Home Cell Work

Best Email: \_\_\_\_\_

Vehicle: \_\_\_\_\_  
Year Make Model Color

License Plate: \_\_\_\_\_

Students Allowed to ride in vehicle with Student Driver:

\_\_\_\_\_

\_\_\_\_\_

*I acknowledge that driving a car to school is a privilege and that Thomas MacLaren School has the right to search the Student Driver's car when on school property or at school sponsored events. Moreover, I acknowledge that the privilege of a parking permit may be taken away for violation of any of MacLaren's policies about driving and parking, and any sort of reckless driving.*

\_\_\_\_\_  
 Student Driver Signature Date

\_\_\_\_\_  
 Parent Signature Date

**To be completed by Business Office Representative:**

Payment Received Date \_\_\_\_\_ Form of Payment \_\_\_\_\_ Initials \_\_\_\_\_