



TRINITY HIGH SCHOOL

3601 Simpson Ferry Road
Camp Hill, PA 17011-6407
(717) 761-1116 ext. #143

2019 DRIVER EDUCATION REGISTRATION

CLASSROOM INSTRUCTION ONLY (NOT behind-the wheel)

Classroom Instruction for Driver's Education will be offered from **3:05pm – 4:50pm** in **Room 114** on the following dates in **JANUARY AND FEBRUARY 2019:**

JANUARY 2019: 8-9-10-22-23-24-28-29-30-31

FEBRUARY 2019: 4-5-6-7-11

MAKE-UP DATES: (for snow dismissals or cancellations) --- February 12-13-14 (more dates to be added if needed)

PRICE: \$50.00. This covers the instructor's fee and materials. Registration form and fee needs to be delivered to **Trinity's Library** (2nd floor) on or **before the cut-off of Dec. 20, 2018**. We will accept cash, check or money orders. (No credit cards)

*****REGISTRATION IS ON A FIRST-COME/FIRST-SERVED BASIS. CLASS SIZE IS LIMITED TO THE FIRST 50 ENROLLEES*****

THE COMPLETE DRIVER EDUCATION COURSE HAS TWO PARTS

1. Thirty (30) hours of classroom instruction is offered at Trinity High School. **No more than two (2) absences of these classes will be permitted, and only for serious reasons.**

2. Six (6) hours of behind-the-wheel experience, which is offered at some of the public school districts, **not at Trinity.**

Successful completion of both parts is usually needed for discounted insurance purposes or credit toward a good driver program. Trinity offers **ONLY** the *classroom* instruction segment of the course. If interested in behind-the-wheel instruction or experience, students should contact their public school districts or companies selling private drivers instruction. Again, Trinity does NOT offer behind-the-wheel instruction...

PLEASE CUT OFF BOTTOM SECTION & RETURN TO LIBRARY WITH \$50.00 REGISTRATION FEE

KEEP TOP PORTION FOR DATES OF CLASSES

Please fill-in the coupon below and return to the **Library** (2nd floor) with \$50.00 registration fee in the form of cash, check or money order made payable to: **Trinity High School** by **December 20, 2018** (No credit cards)

Name _____ Houseletter, section # & room # _____

(Print name EXACTLY how it should appear on final *Certificate of Completion*.)

e.g.: **S4-204**

Address _____ Grade _____

City _____ State _____ Zip _____

Date of Birth _____ - _____ - _____ Telephone # (Indicate if cell # or land-line #): (_____) _____ - _____

Penna. License or Permit # (not required to take the course) _____

Name of Public School District in which you reside _____

For office use only: # _____

Date Received in office: _____

#