



ENROLLMENT FOR THE Winter 2019 SESSION OPENS ON: October 15, 2018

- **In order to enroll in this classroom session you must have been born on or before April 8, 2003.**
- **There is a REQUIRED Parent's Class (2 Hours). Next class is on 1/9/2019, 4:00-6:00pm, NHS-Room 102.**
- **Student must be at least 15 years and 9 months by the start of DE classes. NCS reserves the right to request a student's birth certificate.**
- **Drivers Education Classes: \$250** (15 2-hour classes, plus 2 hour parent class)
- **Drivers Education Road Training: \$650** (12 hours of driving, 6 hours of observation)
- **Drivers Education Classes & Road Training: \$800 (Combo Package/payment plans available)**

Student Name: _____ DOB: ___/___/___

(Please complete name as you would like it to appear on your learner's permit.)

Address: _____ Zip Code: _____

Phone (Eve.): _____ Student (Cell): _____

Parent/Guardian Name: _____ Parent (Cell): _____

Parents' E-mail: _____

Student's E-mail: _____

Learner's Permit # (if you have one already): _____ Exp. Date ___/___/___

A parent/guardian must sign the contract section below:

This will certify that the parent is aware that 24-hour cancellation notice is required for all on-the-road lessons, including both driving and observation instruction in the car. Friday notice must be given for weekend or Monday lessons. There will be a fee of \$40 when driving lessons are cancelled or missed by the student without providing the 24-hour notice.

I have read and I agree with these terms: _____ Parent Signature (Required)

A student must sign the contract section below:

- My age at the time of this registration is 15 years, 9 months or older.
- There are no refunds after 30 days from receipt of registration. PLEASE make sure this class does not interfere with any of your after-school or summer activities.
- I must complete 30 hours classroom time and 18 hours of on-road instruction in order to qualify for a Junior Operator License (JOL) from the Registry of Motor Vehicles. If I miss a class for any reason, I must attend a make-up session in a subsequent month, which will cost \$10. If I do not attend a make-up class for each and every missed class, I will be ineligible to pass the course. There will be a fee of \$40 when driving and/or observation lessons are cancelled or missed without a 24-hour notice.
- Tardiness and/or early departure from any session will count as an absence. Students who arrive late to class will not be allowed to attend the session.
- The instructor has the authority to drop any student from the program who is disruptive, and the student will be ineligible for a refund.
- I understand that it may take up to 6 months to complete the classroom lessons and behind the wheel training.

I have read and I agree with these terms: _____ Student Signature (Required)

Nantucket Community School

Student's Name: _____

Parent/Guardian's Name: _____

PAYMENT POLICY: Payment must be made in full at the time of registration. Cash, checks, MasterCard and Visa are acceptable forms of payment. Please make payment by check or money order payable to the Nantucket Community School and write your child's name and class in check memo. There is a no refund policy. This form, with signatures and payment, is required for your registration to be considered complete. Please drop off your packet to either one of the Nantucket Community School's locations – Town (56 Centre Street) Main (Nantucket Elementary School – Red Cluster, Room A6).

EMERGENCY MEDICAL AUTHORIZATION, HOLD HARMLESS AGREEMENT & CONSENTS: In the event a participant is injured or becomes ill while participating in a program offered through the Nantucket Community School, the team member in charge will contact the participant's parent, guardian and/or emergency contact. However, if the parent, guardian and/or emergency contact cannot be reached, or if in the judgment of the staff, the illness or injury requires immediate attention, the Nantucket Community School is authorized to obtain such medical assistance as deemed necessary or proper, including, but not limited to, appropriate medical treatment at Nantucket Cottage Hospital. In order to provide this authorization, this Emergency Medical Authorization form, Hold Harmless Agreement and Consent form must be completed and on file with the Nantucket Community School.

I, _____, the parent/legal guardian of minor child, _____, who is enrolled in the Nantucket Community School's program/class authorize that said child be taken to the Nantucket Cottage Hospital when the need for such treatment is immediate and efforts to contact me are unsuccessful. I acknowledge that I am responsible for all charges for treatment and subsequent care rendered during this period.

I, _____, the parent/guardian of minor child listed above, voluntarily enroll said child in the Nantucket Community School program, and with enrollment, voluntarily consent to the Nantucket Community School's policies and hereby give permission for my minor child, to participate in the registered programs.

I, _____, the parent/guardian of minor child listed above, understand and agree to save and hold the Town of Nantucket, the Nantucket Public Schools, the Nantucket Community School, its agents, servants and employees, harmless from any and all liability in any way for any occurrence in my voluntary enrollment of myself or my child in this activity which may result in bodily injury, property loss or damage, death or other damages to me or my family, heirs or assigns

In consideration of voluntarily participating and being allowed to enroll my child in this activity, I hereby personally assume all risks for injury in connection with this course/program/activity. I understand that I will be financially responsible for any damage my child may cause in 2018/2019 on any property of the Nantucket Public Schools/Nantucket Community School or any satellite program locations. I understand that my child may also lose the privilege of participating in current and/or future Community School programs.

I further state that I am of lawful age and legally competent to sign this affirmation and release; that I understand the terms herein are contractual and not mere recital; and that I have signed this document as my own free act. Furthermore, if registering for an activity that involves physical exertion, I state that I have consulted with a physician regarding my child's physical health. I affirm that my child is physically fit and I assume responsibility for the risk of injury to my child. I have fully informed myself of the contents of this affirmation and release by reading it before I signed it. By virtue of my signature below I attest that I have asked any/all questions and received satisfactory answers to any/all questions I may have had regarding this hold-harmless agreement.

I hereby authorize communication between the Nantucket Community School and my child's specific public or private school to release and/or obtain pertinent information regarding my minor child for the express education, enrichment and or childcare planning purposes.

In witness hereof, I have executed this affirmation, consent and release at Nantucket, MA on the date listed below:

Parent/Guardian Signature

Parent/Guardian Printed Name

Date