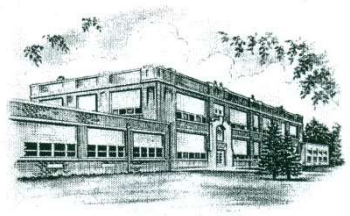

Campbell-Tintah Public Schools

CAMPBELL-TINTAH INDEPENDENT SCHOOL DISTRICT #852
P.O. BOX 8 - 430 CONNECTICUT AVENUE
CAMPBELL, MINNESOTA 56522
School Office – (218)630-5311

Drivers Education Classroom Instruction

Student may be age 14 to enroll in the classroom instruction. The individual who is responsible for registering the student msust print the students full first, middle and last name on the registration form. There is a maximum of 30 students per class
Students may register two ways:

1. Fill out registration form and mail payment to C-T Public School Ofice PO box 8, Campbell, MN 56522
2. Register in person and pay at the C-T Public School Office

Students Legal Full Name_____ _____ _____
First middle last
Street Address_____
City State Zip
Phone_____Emergency Phone_____
Parent email address_____
Student email address_____
Student cell phone_____
Mothers Name_____Fathers name_____
Mothers Phone_____Fathers Phone_____
Mothers work phone_____Fathers work phone_____
Student Grade 2024-2025_____ Student Gender_____ Student date of birth_____
School Attending 2024-2025_____

Does your student have an Individualized Education Plan (IEP)_____
If yes, please share with us any information that will help the instructor (This question is only asked to insure that your student receives the proper help if needed)

Session you are attending **June 9th-13th and 16th-20th from 8am to 11am**
Driver's Education IN District Classroom instruction - $125 IN District Behind the Wheel instruction - $175
If both classes are taken through Campbell-Tintah Schools and paid together - $275
NON REFUNDABLE / TRANSFERABLE

Driver's Education OUT OF District Classroom instruction - $150 OUT OF District Behind the Wheel instruction - $200
If both classes are taken through Campbell-Tintah Schools and paid together - $325
NON REFUNDABLE / TRANSFERABLE

You may pay ½ the fee deposit with the balance due before class starts. Make all payments to Campbell – Tintah school office. Do not make payments to the instructor.

Liability: I hereby release, absolve, and hold harmless Campbell – Tintah Public School ISD #852, its officers, employees and agents from any damage resulting from an injury incurred by me or my child while participation in the above-mentioned programs. I understand C.T Public School #852 assumes no responsibility before, during or after the program. By signing this form, I am allowing photos or videotapes of my child to be publicly in the school district publications or communications.

Paying by check_____ Check #_____ **Please make check payable to C-T Public School** Paying by cash_____

Parent / Guardian Signature_____ Date_____