



Driver's Education Registration Procedures

Please check off each item as you are preparing to send the packet back to the college. Forms must be completed in their entirety, signed and then returned before the class starts. Also, when registering online, please ensure that you enter the student's full name as it appears on their learner permit and not the parents/guardians name.

If any information has been left blank, you will be contacted. You will at that time have to come to the Athens Technical College main campus location, in Athens, Georgia, to complete the enrollment process.

Completed Registration Packets may be emailed to jusry@athenstech.edu or maybe turned in to the Athens Technical College main Campus- Athens Building N.

Scholarships are available by the Georgia Department of Driver's Services

<https://gahighwaysafety.org/driver-ed-scholarship/>

Thank you and if we can be of further assistance, please do not hesitate to contact us.

Tammie Hutchinson-Massey
Administrative Assistant, Economic Development
thutchisonmassey@athenstech.edu
706-369-5763

John Usry
Executive Director, Economic Development
jusry@athenstech.edu
[706-357-0050](tel:706-357-0050)



Driver's Education Pre-
Registration Form

Pre-registration is required. Classes are formed pending sufficient enrollment. Class size is limited. Completed documents must be received five days prior to the start date

to guarantee placement in class. Should there be any changes in scheduling you will be contacted by a member of the Economic Development team.

Driver's permit/License number (required) _____
Student Name _____
Date of Birth (mm/dd/yyyy) _____ Sex (circle one) M - F
Address _____
Phone _____ County of Residence _____
High School _____
Email address where class information will be sent: _____

Parent's Name(s) _____
Address (if different from above) _____
Phone (home) _____ (work) _____ (cell) _____

Scholarships are available by the Georgia Department of Driver Service
<https://gahighwaysafety.org/driver-ed-scholarship/>

****If student does not have a scholarship voucher from the GDEC the \$400 rate will apply**** Credit
Card # _____ Exp Date _____ Security
Code# _____

Students who do not meet the eligibility criteria, fail to meet the class requirements, or do not have a voucher from the DDS will be required to pay the course fee of \$400. Due to the high demand, a credit card is required at time of registration to secure a seat in the class. Your credit card will not be charged unless the student does not have a DDS Voucher

*****Athens Technical College reserves the right to cancel or reschedule classes in the event that a class does not meet enrollment requirements*****



RELEASE OF CLAIMS, WAIVER OF LIABILITY, ASSUMPTION OF RISKS AND
INDEMNIFICATION AGREEMENT
(READ CAREFULLY BEFORE SIGNING)

I hereby acknowledge that my and/or my child's participation in Driver's Education, voluntary, educational program sponsored and administrated by Athens Technical College's Continuing Education Department, involves an inherent risk of and exposure to property damage and bodily or personal injury, including injury that may prove to be fatal, to me, to my child, or to others. Dangers involved in this activity include, but are not limited to, heat related illnesses, hypothermia, cardiac/circulatory problems, musculoskeletal injuries (sprains, strains, bruises, fractures, etc.), stings and bites, concussions, and cuts/lacerations. I fully assume all risks of injury, sickness or death to me and/or my child associated with participation and/or my child's participation in the above stated voluntary activity, and I fully consent to my participation and/or my child's participation. For the sole consideration of Athens Technical College's arranging for and allowing my participation and/or my child's participation in the voluntary program, and in connection therewith, making available for my use and/or my child's use while participation in such program, certain equipment, facilities, grounds or personnel of Athens Technical College, I hereby release Athens Technical College, the Technical College System of Georgia, their members individually and their officers, agents and employees (hereafter "Releasees") from any and all liability, claims, damages, demands, rights, and causes of action of whatever kind, arising from or by reason of any personal injury, property damage, or the consequences thereof, resulting from or in any way connected with my participation and/or my child's participation in the program.

I understand and acknowledge that acceptance of this signed RELEASE OF CLAIMS WAIVER OF LIABILITY, ASSUMPTION OF RISKS; AND INDEMINIFICATION AGREEMENT (hereafter "Agreement") by Releasees shall not constitute a waiver, in whole or in part, of sovereign immunity by Releasees. I further understand and agree that this Agreement shall be effective during the entire period of my participation and/or my child's in the above referenced program.

I understand and agree that the Releasees do not have medical personnel available at all times during the program and are hereby granted permission to authorize emergency medical treatment, if necessary, for me and/or my child, and that such action by Releasees shall be subject to the terms of this Agreement. I state that neither I nor my child has any health-related problems which preclude or restrict participation in this program, and I understand that I am responsible for any and all required medical costs that may possibly result from participation in this program.

I acknowledge and represent that I have fully informed myself of the contents of this Agreement, that I freely and voluntarily sign this Agreement, and that it is my express intent that this Agreement shall contractually bind me, my child, my heirs, executors, administrators, and assigns, and my child's heirs, executors, and administrators, and assigns.

This, the _____ day of _____, 20____(year)

Signature of Parent/Guardian

Signature of Witness
(Must be 18 years or older.)



CONSENT FOR RELEASE OF DRIVING INFORMATION AND WAIVER

I, _____, hereby voluntarily consent to the release of all information held by the Georgia Department of Driver Services or any other federal, state or local government organization of any type, including, but not limited to, law enforcement agencies of federal, state or local government, that relates in any way to my operation of a motor vehicle in the State of Georgia or elsewhere. I grant this consent in furtherance of my request to participate in driver education activities or courses offered in conjunction with the Georgia Driver's Education Commission, the Governor's Office of Highway Safety or the Technical College System of Georgia and this request applies to requests for information submitted by any or all of said agencies of the State of Georgia.

I understand that audio, video, and GPS recording devices may be used as a part of the driver's education course. Some of the vehicles provided for driver education are equipped with recording devices that record audio and video inside the vehicle cab, video facing outboard the front windshield, and GPS recording. I understand that such audio, video, and GPS recording devices are in use and consent to their use. I further consent to GDEC, TCSG, and the driver education provider using pictures, audio, and video, obtained from said recording devices, for training and PR purposes.

I understand that participation in the driver education activities or courses could result in my personal or bodily injury, including death. I understand that the risks that I may encounter include, but are not limited to, transportation accidents. In the event of a transportation accident, which could include bodily or personal injury, or even death, I am responsible for all costs, including but not limited to, the costs of medical care.

I understand, and hereby acknowledge, that I am not obligated or required to participate in the driver education activities or courses offered in conjunction with the Georgia Driver's Education Commission, the Governor's Office of Highway Safety or the Technical College System of Georgia. In exchange for the instruction, use of equipment, materials, supplies and for being allowed to participate in this driver's education course, I waive any and all claims and causes of action related to my participation and hereby jointly release, acquit and forever discharge the State of Georgia, the Georgia Driver's Education Commission, the Governor's Office of Highway Safety, and the Technical College System of Georgia, their respective officers, members, directors, including its past, present, and future subsidiaries, divisions, agencies, instrumentalities, successors, agents, servants, representatives, employees, affiliates, partners, heirs, administrators, personal representatives, assigns, attorneys and volunteers.

This consent is given freely and voluntarily by me without coercion, duress, threat or promise of any kind and shall remain in effect for a period of ten (10) years after the date of signature below.

By signing below, I certify that I am 18 years of age and am otherwise fully competent to give this consent.

Dated at _____ (location) this _____ day of _____, 20____.

Parent/Guardian Signature: _____

Parent/Guardian Printed name: _____

Date of Birth: _____

Student's Driver's License number: _____



**CONSENT BY PARENT OR LEGAL GUARDIAN FOR
RELEASE OF DRIVING INFORMATION
AND WAIVER**

I, _____ (parent or legal guardian), hereby voluntarily consent on behalf of, _____ (student), a minor, to the release of all information held by the Georgia Department of Driver Services or any other federal, state or local government organization of any type, including, but not limited to, law enforcement agencies of federal, state or local government, that relates in any way to the minor's operation of a motor vehicle in the State of Georgia or elsewhere. I grant this consent in furtherance of my request for the minor's participation in driver education activities or courses offered in conjunction with the Georgia Driver's Education Commission, the Governor's Office of Highway Safety or the Technical College System of Georgia and this request applies to requests for information submitted by any or all of said agencies of the State of Georgia.

I understand that audio, video, and GPS recording devices may be used as a part of the driver's education course. Some of the vehicles provided for driver education are equipped with recording devices that record audio and video inside the vehicle cab, video facing outboard the front windshield, and GPS recording. I understand that such audio, video, and GPS recording devices are in use and consent to their use. I further consent to GDEC, TCSG, and the driver education provider using pictures, audio, and video, obtained from said recording devices, for training and PR purposes.

I understand that the minor's participation in the driver education activities or courses could expose the minor to personal or bodily injury, including death. I understand that the risks that the minor may encounter include, but are not limited to, transportation accidents. In the event of a transportation accident, which could include bodily or personal injury, or even death, I, as the parent or legal guardian of the minor, am responsible for all costs, including but not limited to, the costs of medical care.

I understand, and hereby acknowledge, that the minor is not obligated or required to participate in the driver education activities or courses offered in conjunction with the Georgia Driver's Education Commission, the Governor's Office of Highway Safety or the Technical College System of Georgia. In exchange for the instruction, use of equipment, materials and supplies by my child, and his/her being allowed to participate in this driver's education course, I waive any and all claims and causes of action related to the minor's participation and hereby jointly release, acquit and forever discharge the State of Georgia, the Georgia Driver's Education Commission, the Governor's Office of Highway Safety, and the Technical College System of Georgia, their respective officers, members, directors, including its past, present, and future subsidiaries, divisions, agencies, instrumentalities,

successors, agents, servants, representatives, employees, affiliates, partners, heirs, administrators, personal representatives, assigns, attorneys and volunteers.

This consent is given freely and voluntarily by me, on behalf of the aforementioned minor, without coercion, duress, threat or promise of any kind and shall remain in effect for a period of ten (10) years after the date of signature below or until revoked in writing by the minor upon the minor reaching the age of majority. Revocation of consent must be in writing and delivered to the Georgia Driver's Education Commission at 7 Martin Luther King Jr. Drive, Atlanta, Georgia 30334.

By signing below, I certify that I am the legal guardian of the aforementioned minor, that I am 18 years of age and am otherwise fully competent to give this consent.

Dated at _____ (location) this _____ day of _____, 20____.

Signature of Parent or Legal Guardian: _____

Printed name of Parent or Legal Guardian: _____

Printed name of Student: _____

Student's Driver's License Numer: _____

Driver Training Student Contract

(ALL CONTRACTS MUST BE PRE-NUMBERED AND IN DUPLICATE) 000_____

**Athens Technical College
GDEC GRANT ID # DE-2016-000-00266
800 US Highway 29 North
Athens, GA 30601
706-369-5763**

Name: _____	Dates & Times of Instruction: _____
Address: _____ _____	_____
Telephone No.: _____	Location of Instruction: _____
Emergency Phone No.: _____	Type of Instruction: <input type="checkbox"/> 30/6
Date of Birth: _____	Course Fee: \$400
DL/Permit #: _____	DL/Permit Expiration Date: _____

I, the undersigned student, agree to complete the above course of instruction for a fee of \$400, consisting of 30 hours of classroom instruction and 6 hours of behind-the-wheel instruction by the above-named GDEC Driver Training School. It is understood that this driver training school and instructor are approved by the Georgia Drivers Education Commission (GDEC) and that each instructor is trained by the Georgia Department of Driver Services.

The student's successful completion of the above-named course requires each of the following:

- 1. Punctual attendance for all sessions.**
- 2. Reasonable attentiveness and participation in all classes.**
- 3. Makeup classes for missed sessions.**
- 4. Successfully passing a written examination with a grade of at least 70.**

I understand that if I fail to comply with the terms and conditions of this agreement, I am in breach of contract and the school will not be under any obligation to fulfill the terms of this contract, and may, at its option, terminate this agreement immediately.

It is agreed that an owner, instructor, or employee of this driver training school shall not give the impression directly or implied to a student that upon completion of the course the student will receive a license to operate a motor vehicle. However, immediately upon the student's successful completion of the course as described above, the driver training school agrees to provide a certificate of completion to the student.

This driver training school has and will maintain for the protection of the contractual rights of the student a surety bond in the principal sum of ten thousand (\$10,000.00) dollars for the students.

This agreement constitutes the contract between the above-named driver training school and the above-named student and no verbal statements will be recognized.

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Signature of Student	Signature of Authorized School Representative
Date	Date

Signature of Parent or Guardian Date