



# Arrive Alive Driving Academy, LLC

## Personal Information - Student

<b>Full Legal Name</b>	
<b>Nickname (Name you prefer)</b>	
<b>Home address</b>	<b>Street</b> _____ <b>City</b> _____ <b>State</b> _____ <b>Zip code</b> _____
<b>Student e-mail address</b>	
<b>Student's Cell phone number</b>	
<b>2<sup>nd</sup> Contact Number</b>	
<b>Birthday (MM/DD/YYYY)</b>	
<b>Permit Number</b> (leave blank if you do not have your permit)	
<b>Date Permit was issued</b>	
<b>Name of High School Attending &amp; Grade</b>	
<b>School dismissal time</b> (pick up time)	
<b>Emergency Contact Information</b>	
<b>In case of emergency, contact</b> (Full Name & Relationship)	
<b>Emergency contact #</b>	
<b>e-mail address for Payment Receipt</b> (sent when full payment is received)	