

# DACULA HS DRIVER'S EDUCATION REGISTRATION FORM



Student's Name: (As written on Learner's Permit) \_\_\_\_\_

Student GCPS ID #: \_\_\_\_\_ Learner's Permit #: \_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_ Student Cell #: \_\_\_\_\_

Student's Social Security #: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell or Best Contact Phone #: \_\_\_\_\_

Dates of Class that you wish to sign up for: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

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***Please Circle Method of Payment Below:***

Cash                      Check                      My Payments Plus

My Payments Plus Receipt # (please attach receipt) \_\_\_\_\_

Check # \_\_\_\_\_ Cash Receipt # \_\_\_\_\_

*You will receive a syllabus, student liability form, and contract on the first night of class that must be signed and returned to the Community School Office by the third night of class. Students cannot receive a certificate until all documents are signed and returned.*

**Please turn this form into the Community School Office or email to  
deborah\_walker@gwinnett.k12.ga.us**