



A-Team Driving School
244 N. Main Street
Mullica Hill, NJ 08062
www.Ateamdrive.com
856-417-3355

Brush Up Lesson Schedule/Checklist

Student Name: _____

Student's Address: _____

Student Phone Number: _____

Student DOB: _____

Parent/Guardian Phone Number: _____

Date of Lesson 1 _____ Start/Stop Time: _____

Pick-up Site: _____ Drop-off Site: _____

Date of Lesson 2 _____ Start/Stop Time: _____

Pick-up Site: _____ Drop-off Site: _____

Instructor: _____

_____ hours @ **\$80.00** per hour for a total of \$_____.

6 hours of instruction cost \$425; DISCOUNTED \$55.

All Material below must be provided to A-Team Driving School Prior to Lesson 1

_____ Completed Brush Up Lesson Contract

_____ Payment to A-Team Driving School

_____ Logged in Book

_____ Logged in Computer

More information about the student's instructor and car can be found on our website at www.ateamdrive.com



Terms of Agreement for Brush-Up Lesson Contract Agreement

This agreement for driving instruction is service between **A-Team Driving School** and _____ (parent/guardian) and _____ (student) who reside at _____ (address).

This agreement is for driving instruction on a per hour basis for the direct purpose of refining and enhancing driving skills. The student will be picked up/dropped off at the location described below unless otherwise noted. The student/parent should express to the instructor what areas need to be improved or practiced. Upon completion of the lesson, the driver will provide feedback of the skills covered. It is understood there is a 2 hour minimum for this service. 6 hours of instruction will consist of (2) three hour sessions. **No refunds** will be issued after scheduling the lesson(s). If a lesson is rescheduled/canceled within **seven (7) days** of the scheduled lesson(s), a **\$50.00** processing fee will be charged in order to reschedule the lesson(s). If the pickup/drop off location is **30 minutes or more** from 244 N. Main Street Mullica Hill, NJ there will be a **surcharge of \$25**.

Any changes to the items outlined in this contract must be agreed upon by both parties and added to the original contract prior to the signing by either party. Additional items must be added in the comments section and initialed and dated by both parties.

_____ hours @ **\$80.00** per hour for a total of \$_____.
6 hours of instruction cost \$425; DISCOUNTED \$55.

SIGNATURE PAGE

Comments:

I have read and agree to the terms outlined in this document.

Parent/Guardian/Student Signature (if over 18)

Date



A-Team Driving School Owner Signature

Date

Notes: _____



Driving Skills Checklist

Student Name: _____

Students will be scored in each area listed below on a scale of 1-3 (1=Proficient, 2=Developing, or 3=Needs Practice).

STARTING

- _____ Adjusting of Seat, Mirrors
- _____ Seat Belts
- _____ Check Parking Brake
- _____ Ignition Switch On
- _____ Starting of Engine

SIGNALING

- _____ Check Traffic
- _____ Putting Vehicle in Motion

STOPPING

- _____ Checking Traffic
- _____ Signaling
- _____ Proper Position
- _____ Stopping Vehicle Smoothly and Safely
- _____ Gear Shift in Proper Position
- _____ Setting Parking Brake
- _____ Shutting Engine Off

STEERING

- _____ Proper Hand Position on Wheel
- _____ Proper Grip on Wheel
- _____ Center of Lane
- _____ Aim High in Steering

TURNING

- _____ Signaling
- _____ Vehicle Positioning
- _____ Right Turns
- _____ Left Turns
- _____ Right Turn on Red

BACKING

- _____ Checking Traffic
- _____ Hand Position
- _____ Straight Line
- _____ Speed Control

HIGHWAY DRIVING

- _____ Lane Positioning
- _____ Signaling
- _____ Changing Lanes
- _____ Speed Control
- _____ Merging

INTERSECTIONS

- _____ Signaling
- _____ Lane Positioning
- _____ Right of Way
- _____ Passing

THREE POINT TURN

- _____ Signaling
- _____ Vehicle Positioning
- _____ Checking of Traffic
- _____ Turning

PARKING

- _____ Signaling
- _____ Checking of Traffic
- _____ Vehicle Positioning
- _____ Hand Position
- _____ Turning of Wheel
- _____ Speed Control
- _____ Proper Gear Position
- _____ Set Brakes
- _____ Ignition Off/Remove Key

**See Reverse Side for Comments*

**Comments/Recommendations:**[illegible]

Instructor Name (Printed)

Instructor Signature

Date





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GDL DRIVING RESTRICTIONS

Special Learner's Permit (16 years old)

- May not operate a vehicle between 11:01pm and 5:00am
- May not use a hand-held or hands-free electronic device (ex. Cell phone)
- Must have a supervising driver 21 years or older who has had a license for 3 years in passenger seat
- Only one additional passenger in car (not including supervising driver) unless accompanied by a parent
- If a GDL driver is over the age of 21, the passenger and time restrictions do not apply
- Must display red GDL decal in upper left corner of front and rear license plate

Examination Permit (at least 17 years old)

- Same as above

Probationary License

- May not operate a vehicle between 11:01pm and 5:00am
- May not use a hand-held or hands-free electronic device (ex. Cell phone)
- Only one additional passenger in car unless accompanied by a parent
- Must display red GDL decal in upper left corner of front and rear license plate

*Failure to abide by any of the GDL restrictions is subject to a \$100 fine - N.J.S.A. 39:3-13.8

Are you worried about passing your road test?

*Call us to schedule our **Road Test Service**...We'll pick you up, practice the skills on the test, have you take the test in our car, and when you pass, we'll take you to get your license!*



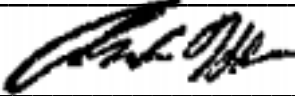
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Insurance Certificate

This letter certifies that the student name below has completed 6 hours of behind-the-wheel instruction with a licensed driving instructor at A-Team Driving School

Student Name: _____

Date: _____

Authorized Signature: _____


School License # **000302**

***Please retain a copy of this certificate for
your records***



Student Name: _____ **Instructor:** _____

The purpose of this form is to provide the Lesson 2 instructor (when applicable) with the skills that were covered during Lesson 1 and to provide feedback to the Lesson 2 instructor about student progress. **Please place a check in the circle certifying that the task/skill was completed. Please fill out this form and upload it to the student's folder on the drive when complete.**

1. Permit Signed ☐
2. Introduction of the vehicle ☐
3. Parking lot driving ☐
4. Cone drills ☐
5. Residential/neighborhood/development driving ☐
6. Residential roads/business district driving ☐
7. Parallel parking ☐
8. K-Turns ☐
9. Perpendicular Parking ☐
10. Debrief with parents and confirm date/time/location of road test on **schedule checklist.** ☐

Use this section to provide essential feedback to the instructor:

Notes: _____

