



**Regular Rates**  
**Driver's Ed: \$350**  
**Drug & Alcohol: \$100**  
**DIP: \$100**

7515 Annapolis Rd Suite 308,  
 Hyattsville, MD 20784 Phone: 240-770-5212  
 Email: roadmasteracademy1@gmail.com  
 www.roadmasterdrivingschoolacademy.com

**Policies and Guidelines:**

- \*MVA requires new drivers to receive 30 hours of classroom and 6 hours of behind-the-wheel training.
- \*Minimum age for enrollment is 15 years old and 9 months. Student must present proof of age.
- \*Regular classroom hours are Monday through Friday, 10:00 am to 1:15 pm and 5:30 pm to 8:45 pm.
- \*MVA requires students to attend classes in sequence.
- \*Certificates are issued only after the successful completion of all classroom coursework, final examination and 6 hours of behind-the-wheel training and evaluation.
- \*Road Master Driving School fully complies with all Maryland Motor Vehicle Administration rules and regulations.
- \*Please do not ask any employee of this institution to violate or make any exceptions to state regulations.
- \*Any violations must be reported to the school immediately.
- \*For students below 18 years of age, a parent or guardian must co-sign this application.

\*Road Master Driving School reserves the right to remove or dismiss any student who disrupts the classroom session, distracts other students, fails to arrive on time, or for any act that is considered inappropriate or disruptive. Any student who vandalizes or destroys school or building property will be dismissed. The student, parent or guardian will be held liable for damages.

\*Upon the request of the student, Road Master Driving School will issue a full refund up to 24 hours before the scheduled start of the first class and fifty percent after the first class. There will be no refunds thereafter.

\*In-car session cancellations require a 24 hours in advance notice.

**\*There is a \$35.00 fee for late cancellations.**

**\*There is a \$10.00 fee for student workbook.**

**\*Students must wait at least 2 weeks before starting behind the wheel training.**

\*These policies and guidelines apply to all students registered for any class at Road Master Driving School.

Please complete enrollment application below

<b>First Name</b> <input style="width: 95%;" type="text"/>	<b>Middle Name</b> <input style="width: 95%;" type="text"/>	<b>Last Name</b> <input style="width: 95%;" type="text"/>
<b>Street Address</b> <input style="width: 95%;" type="text"/>	<b>City/State</b> <input style="width: 95%;" type="text"/>	<b>Zip Code</b> <input style="width: 95%;" type="text"/>
<b>Phone Number</b> <input style="width: 95%;" type="text"/>	<b>Date of Birth</b> <input style="width: 95%;" type="text"/>	<b>Email</b> <input style="width: 95%;" type="text"/>
<b>Learner's Permit Number</b> <input style="width: 95%;" type="text"/>	<b>Expiration Date</b> <input style="width: 95%;" type="text"/>	<b>County</b> <input style="width: 95%;" type="text"/>

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

**Payment Details**

Date Paid: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

CASH

CARD

CHECK

OTHER  (\_\_\_\_\_)

Receipt # \_\_\_\_\_

Balance: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

CASH

CARD

CHECK

OTHER  (\_\_\_\_\_)

Receipt # \_\_\_\_\_

Balance: \_\_\_\_\_

Employee: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

CASH

CARD

CHECK

OTHER  (\_\_\_\_\_)

Receipt # \_\_\_\_\_

Balance: \_\_\_\_\_

Employee: \_\_\_\_\_

Registered Class: \_\_\_\_\_

Start Date/Time: \_\_\_\_\_