



1704 S. Slappey Blvd.  
Albany, GA 31701

## Economic Development Programs Registration Form One on One – Weekend Driving Program

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip \_\_\_\_\_ County \_\_\_\_\_

DATE OF BIRTH	SEX CODE	RACE CODE	
Last Grade Level Completed	SEX CODES 1. MALE 2. FEMALE	RACE CODES 1. AMER INDIAN 2. ASIAN 3. BLACK	4 HISPANIC 5. WHITE

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Fax \_\_\_\_\_

Name of School: ALBANY TECHNICAL COLLEGE

Employer \_\_\_\_\_

Employer Address \_\_\_\_\_

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

COURSE NAME	COURSE DATE/Time	COURSE LOCATION	FEE
Driver's Education One-On-One – Weekend Driving Program Minimum 2 hrs.	TBD	ATC	<b>\$75.00 per hour</b> <b>\$25 w/pick up &amp; return</b> <b>OR</b> <b>\$385.00 for 6 sessions</b> <b>w/pickup and drop off</b>

All Albany Technology Center courses are self-supporting. Therefore, all refunds **MUST BE REQUESTED A MINIMUM OF FIVE (5) WORKING DAYS BEFORE A COURSE BEGINS**. If the Director cancels a class, the registration fee will be refunded.

**There WILL BE NO REFUNDS ISSUED AFTER A COURSE BEGINS.** Unless otherwise approved by Vice-President of Economic Development. At that time, there will be **15% surcharge for any fee refund request or duplicate certificate request. Credit card refunds will be issued against the card of original purchase. If a refund is to be issued from Albany Tech, a W9 and vendor form will be required. The refund will take up to 06-10 weeks for payment made by cash, money order or check.**

Method of Payment:    Check       Cash       Invoice (letter of request or purchase order number required)  
Charge My:       MasterCard       VISA (credit card payments, please call for administrator's assistance)

Authorized By: \_\_\_\_\_ Date: \_\_\_\_\_  
(For invoice and credit card payments)

We always strive to conduct all scheduled workshops. However, there may be times when registration numbers will require us to reschedule. We apologize for any inconvenience this may cause.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

CALL – 229-430-3563 or 229/430-0557 or EMAIL – [EDP@albanytech.edu](mailto:EDP@albanytech.edu)



## **One-On-One Driver's Education Policy Refund /No Show/ Cancellation**

### **Refunds**

Refunds for Weekend One-On-One Driver's Training at Albany Technical College will only be approved if the request is made **five (5) working days** before the first driving session begins.

No refunds will be issued for requests made after 5 working days or for no-shows.

If a refund is approved, credit card refunds will be issued against the card of original purchase.

Refunds for cash, money order, or check will require that the enrollee complete a W9 and vendor form. Refunds for cash, money order, or check will take up to 6-10 weeks.

### **Cancellations / No Shows**

Students who find they cannot attend a session they have scheduled with the instructor, must notify the instructor at least **3 days prior to the scheduled session**. If the student does not notify the instructor about a cancellation or if the student is a no-show, the student will **forfeit 2 hours of session time** and will not be refunded for it. It is the student's responsibility to communicate with the instructor about sessions, and to make every effort possible to keep appointments for their driving sessions.

I have read and understand the policies above.

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Signature

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Date



## One-On-One Driver's Education

### COVID-19 PARTICIPATION WAIVER

I, \_\_\_\_\_, understand that my participation in the offered training is  
Student  
voluntary. I am freely and voluntarily choosing to enroll in this training being fully aware of the potential risk related to transmission of the COVID-19 virus. I have had all my questions addressed and am waiving any claim I might have, now or in the future, related to any injury or illness the student could potentially sustain due to taking this course. Furthermore, I am giving my express permission for the student to be medically examined prior to commencing participation in the course.

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

\_\_\_\_\_  
Date