

TEMPLE CHRISTIAN ACADEMY

STUDENT DRIVER REGISTRATION/TRANSPORTATION AGREEMENT

Student's Name: _____ Birth Date: _____ Age: _____

Grade: _____ SC Driver's License Number: _____ Expiration Date: _____

Parent's Name: _____

Parent's Phone Number: _____

Vehicle #1 - Make: _____ Model: _____ Year: _____ Color: _____

Vehicle #1 - License Plate Number: _____ License Plate Expiration: _____

Vehicle #1 - Insurance Company: _____ Policy Number: _____

Vehicle #2 - Make: _____ Model: _____ Year: _____ Color: _____

Vehicle #2 - License Plate Number: _____ License Plate Expiration: _____

Vehicle #2 - Insurance Company: _____ Policy Number: _____

SC Driving Restrictions for Conditional and Special Restricted Licenses: You cannot transport more than two passengers under the age of 21 unless you are accompanied by a licensed adult who is at least 21 years old. The only exception is if you are transporting family members or students to and from school. See more information regarding restrictions at http://www.scdmvonline.com/DMVNew/default.aspx?n=initial_driver_license

Please place a check beside the number which best describes the student driver.

1. _____ **The student driver will be driving his/her personal vehicle; other students will be transported in this vehicle to and from school.**

Siblings, family members, or other students being transported to and from school by the student driver must have their name and grade listed below. Written permission must be granted from all parents involved if the student is not a sibling.

2. _____ **The student driver will be driving his/her personal vehicle; no other students will be transported in this vehicle to and from school.**

We as parents, legal guardians/custodians of, _____, who is presently enrolled in TEMPLE CHRISTIAN ACADEMY, for and in consideration of this request do hereby agree to hold TEMPLE CHRISTIAN ACADEMY, its employees, agents or servants, harmless from any liability which may result from any injury or damage to the herein before mentioned student, either, to his person or property, resulting from the granting of this request.

We have read, and we understand all of the rules pertaining to student driving privileges on the property of Temple Baptist Church and Temple Christian Academy. If any of the rules are violated, parking privileges may be suspended or revoked.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____