

HINGHAM HIGH SCHOOL DRIVER'S EDUCATION

SUMMER 2024 SESSIONS

Please check one option:

_____ SUMMER I: Week of June 24 - 28 8:30 – 3:00 each day

You **MUST*** be **15.9 years old** –born on or **BEFORE** **September 24, 2008**

_____ SUMMER II: Week of July 15 - 19 8:30 – 3:00 each day

You **MUST*** be **15.9 years old** –born on or **BEFORE** **October 8, 2008**

_____ SUMMER III: Week of July 22 – July 26 8:30 – 3:00 each day

You **MUST*** be **15.9 years old** –born on or **BEFORE** **October 22, 2008**

_____ SUMMER IV: Week of Aug 5 – Aug 9 8:30 – 3:00 each day

You **MUST*** be **15.9 years old** –born on or **BEFORE** **November 9, 2008**

**This is a State of MA Law.*

You DO NOT have to have a permit to take the classroom portion but you must be **15.9 years old ON OR AFTER THE DATE OF THE FIRST CLASS***

To register for one of these sessions, please fill out the attached form and return it to:

Hingham High School • Driver's Education Program • 17 Union Street • Hingham, MA 02043

Program Cost: Hingham Residents - \$900.00 / Non-Hingham Residents - \$1,000.00. (OPTION: 50% payment is due with application, Balance is due on the first day of classroom session.) Check payable to **TOWN OF HINGHAM.**

CLASSES ARE LIMITED TO 20 STUDENTS!!

SPACE WILL NOT BE HELD WITHOUT A PAYMENT.

PLEASE PRINT NEATLY!

STUDENT'S LEGAL NAME: _____

Address: _____

Date of Birth: _____/_____/_____

STUDENT CELL NUMBER: _____

Student email: _____ MUST INCLUDE THIS!

PARENT email: _____

MANDATORY PARENT CLASS:

Parents are required to take the Parent Course before a student can begin the driving portion. (RMV State Law). We offer the course monthly.

If taken within the past 5 years, please provide the certificate with this application. *If you cannot provide this certificate, you must provide it before we can begin the driving process.* Contact the school where you took the course for a copy of the certificate.

If the course was taken at HHS within the past 5 years, we will have it on file. Please provide the following information:

Month & Year Course was Taken: _____ Name of student course was taken for: _____

An email confirmation will be sent regarding your space in the course.