



PROGRESSIVE DRIVING SCHOOL

516 South High Street (UNIFOR BUILDING)
THUNDER BAY
P7B 3M3
ONTARIO
Office: 807-343-9291



www.progressivedriving.ca
email: driving@tbaytel.net

COURSE REGISTRATION FORM

STUDENT'S NAME _____

ADDRESS _____

Apt. # Street City Postal Code: _____

TELEPHONE Home & Cell/Text of student: _____

DATE OF BIRTH day/month/year: _____

E-MAIL ADDRESS OF STUDENT: _____

School / College / University / Other: (name of school if applicable) _____

PLEASE REGISTER ME FOR: (Course month) _____

* Do you have your G1 licence? Y / N _____ If Yes, How Long (date): _____

PAYMENT in Interac e-Transfer \$ _____ to: driving@tbaytel.net

"I certify that the statements in this document are accurate and consent to the release of any information contained herein to the Ministry of Transportation, Insurance Bureau of Canada and the MTO Course Inspector".

Driving Availability (if you have your G1)

Please inform us of times you are available to drive:

Do you have any learning or language difficulties that may affect your studying or driving with us? _____

*Are you taking any medication (prescribed or non-prescribed) that may affect your driving?

(This information is confidential to Progressive Driving School only, for the safety of you and our instructors)

~~Will you need the use of the instructor's vehicle for the road test?~~ Because of the current Covid 19 crisis, this option is no longer available

**This form can be filled out with ADOBE ACROBAT READER which is a free download*

<http://progressivedriving.ca/>