

**Customer Information**

The information in the shaded sections is required by us to comply with the *Driving Instructors Act* and the *Driving Instructors Regulations*. All other information is voluntary and is used to assess and formulate an appropriate learning strategy, tailored to each customer's needs.

**Unless required by law or regulation, your personal information will not be passed to any third-party without your consent.**

**Personal Information**

|  |  |
| --- | --- |
| **Full Name** |   |
| **Date of Birth** |  |
| **Address** |  | **Post Code** |  |
|  |  |
| **Telephone** | **Home**:  | **Mobile**:  |
| **Licence №*****(Not Card №)*** |  | **Expiry Date**:  |
| **Email** |  |
| **Log Book / App****Hours** |  |

**How did you hear about All Things Driving?**

|  |
| --- |
| *Returning Customer / Friend / Yellow Pages / Web Search / Advertising on Car / School Newsletter**Other:* |

**Emergency Contact**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Mobile:** |  |

**Medical Information**

|  |
| --- |
| **Do you have Diabetes?**No / Yes – Controlled by Insulin / Oral Medication / Diet |
| **Have you ever had any type of Epilepsy?**No / Yes: |
| **Have you ever had attacks of giddiness, blackouts, fainting or other sudden periods of unconsciousness?**No / Yes: |
| **Do you have any medical or mental disabilities which may affect your driving?**No / Yes: |
| **Do you have any physical disability that may affect your driving?**No / Yes: |
| **Do you take any medications which may affect your driving?**No / Yes – *Your Doctor or Pharmacist will be able to advise you.* |
| **Do you have any learning difficulties?**No / Yes: |
| **Do you wear glasses or contact lenses when driving?**No / Yes: |

**Payments & Receipts**

|  |
| --- |
| **Payments:*** We accept Credit Cards ( MasterCard, Visa & American Express ), EFTPOS, Cash.
* 2.62% surcharge applies to Amex.
* Direct Deposit ( EFT or Branch – CommBank ) – must be arranged prior to lesson.
* All charges are GST inclusive.
 |
| **Receipts:*** We will issue a Receipt/Tax Invoice to the email address supplied.
* *If you prefer a printed copy please circle Yes – printed copy.*
 |
| **Email (for receipt):**@ |

**Cancellation Policy**

|  |
| --- |
| * More than 24 hours notice – no charge. Refund or reschedule lesson.
* Less than 24 hours notice – $45.00 Cancellation Fee applies.
* If the Instructor arrives at pickup and customer not available – full lesson charged.
 |

**Refund Policy**

|  |
| --- |
| *If you are not happy with our service for any reason, we will happily refund the unused portion of any**pre-paid lesson package, subject to the formula below.** If you’ve completed less than 5 hours: Refund = Package Price minus ( $ 90 x hours used ).
* If you’ve completed 5 hours or more: Refund = Package Price minus ( $ 86 x hours used ).
 |
| **Signature:** |  | **Date:** |  |