## **Application for Community Bank Learner Driver Training Program**



Name							
Address							
Town / Locality				Pos	tcode		
Mobile							
Email							
Date of Birth				Lear licer	ner nce no.		
Gender		Male	Female	Other	Other		
Consent for use of images		Please tick for consent for images to be used by Maldon & District Community Bank, including social media, print media, company website and annual report.  Yes No					
I hereby apply for entry to the Maldon & District Community Bank Learner Driving Program. I acknowledge that, although entry to the course is facilitated and funded by the Maldon & District Financial Services Ltd (MDFSL), they do not guarantee, not accept any liability for, my safety whilst travelling to or from, or participating in the Driving Training Program.  I also acknowledge that MDFSL provides no warranties or guarantees as to the performance of the Learner Driving Training Program, nor that the provider of the course has the required Liability or other Insurance, and that it is my own responsibility to confirm that the provider has such insurance.							
There is a \$150 charge per participant for the driver training course. This fee is a small contribution to the total course cost of \$900 per participant. The participant fee of \$150 is to be paid at least seven (7) days prior to the commencement of the course (details of how to make this payment will be provided when you receive notification of the course date. Your place in the course will be forfeited if the participant fee is not received.							
Signed					Date		
AND, WHERE THE PERSON IS UNDER 18 OR HAS A GUARDIAN APPOINTED, THE PARENT OR GUARDIAN MUST SIGN BELOW:  Parent / Guardian Consent:							
I / We				of			
	[print r	name(s)], as the Pa	arent(s) / Guardian(s)		[name of	participant]	
have read, understood and agree to the terms and conditions and hereby consent to them.							
Signed				Date			