PARENT/TEEN DRIVING AGREEMENT

courteous to other drivers, bicyclists, motorcyclists, and pedestrians at all times. I promise that I will obey all the rules of the road.					
I promise that I will make sure that I stay focused on driv	ing.				
 I will drive with both hands on the wheel. I will never eat, drink, or use a cell phone to talk or send or receive text messages while driving.	 I will call my parents for a ride home if I am impaired in any way that interferes with my ability to drive safely. I will never use earphones to listen to a mp3 player or other electronic devices while I drive. 				
 promise that I will respect laws about the use of drugs a I will drive only when I am alcohol and drug free. I will never allow any alcohol or illegal drugs in the car. 	• I will be a passenger only with drivers who are alcohol and drug fre				
 I will drive only when I have permission to use the car and I will not let anyone else drive the car unless I have permission. I will only drive someone else's car if I have parental consent. I will pay for all traffic citations or parking tickets that I receive. I will complete my family responsibilities and maintain good grades at school as agreed upon below: 	 During the period I hold my Provisional License (Class D), I will not drive between the hours of 12:00 midnight and 5:00 a.m. under an circumstance. During the first 6 months after obtaining my Provisional License (Clast D), I will only allow immediate family members to ride as passenger in the vehicle I am driving. During the second 6 months after obtaining my Provisional License (Class D), I will only allow 1 unrelated passenger under 21 years of the second s				
• I will contribute to the costs of gasoline, maintenance, and insurance as agreed upon below:	 age to ride in the vehicle I am driving. Following the first and second 6-month periods after obtaining my Previsional License (Class D), I will only allow a maximum of 3 unrelate passengers under 21 years of age to ride in the vehicle I am driving 				

I agree to follow all the terms and conditions contained in this agreement. I understand that my parents or guardians will impose the penalties indicated below, including removal of my driving privileges, if I violate this agreement. I also understand that my parents will allow me greater driving privileges as I become more experienced and as I demonstrate that I am always a safe and responsible driver.

Penalties for contract violations

•	No driving for	months if I drive after using alcohol or drugs.	•	0	nths if I violate the passenger restrictions
•	No driving for moving traffic violation	months if I receive a traffic ticket for any .	•	associated with my Provisional License (Class D).No driving for months if I fail to adhere to requirements so	
•		months if I violate the nighttime driving vith my Provisional License (Class D).		forth by Georgia law related	to the use of safety belts.
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Signatures

Driver:	Date:
Parent (or guardian):	Date:
Parent (or guardian):	Date: