

# **MasterDrive**

## ONE & TWO DAY 'SKILLS' CLINIC PROGRAMS APPLICATION PACKAGE INSTRUCTIONS

### PLEASE NOTE:

Our classes usually fill up well in advance. Reservations cannot be held without payment. To maintain a reservation and avoid possible rescheduling, we must receive the following at least 5 days prior to the class:

- |   |                  |
|---|------------------|
| ✓ Application Form                            | {                |
| ✓ Waiver of Liability and Release             | { these may be   |
| ✓ Current copy of vehicle insurance I.D. card | { (949) 753-0420 |
| ✓ Completed Automobile Safety Inspection      | {                |

The tuition for the Skills Based Driver Training Program may be paid by check, money order, cash (exact amount), Discover, Visa or MasterCard.

**MAKE YOUR APPOINTMENT FOR THE AUTOMOBILE SAFETY INSPECTION IMMEDIATELY!** This inspection can be performed by any licensed repair facility. Not required for new (under 15,000 miles) or rental vehicles.

### **Unacceptable Training Vehicles**

Some vehicles may be unacceptable for training purposes. Other vehicles may have limitations that will not allow for maximum training levels.

In order to assure that the student receives the maximum benefit, we strongly recommend that you discuss the selection of the vehicle to be used in the driving skills exercises with a member of our staff prior to the clinic.

For your convenience a Personal/Auto Checklist and General Information sheet is on the next page. Please review this prior to class.

**Please do not reschedule at the last minute.** If you must reschedule, please give us at least five days notification. Clinic slots that can not be replaced result in higher costs and delays in training. **A rescheduling fee of 50% (one half), of the Skills Clinic tuition will be charged unless the student notifies MasterDrive no less than 5 (five) business days prior to the confirmed class. If the student 'NO SHOWS' without prior notification to MasterDrive, the rescheduling fee is 100% of the Skills Clinic tuition.**

We request that students driving standard transmission cars be reasonably comfortable with basic clutch operation before participating in a Skills Clinic. One hour of individual off-street private instruction with one of our staff, using the student's car, is available at an additional \$60.00 fee.

We have found that the most effective training is realized when two consecutive days of skills training are followed by the classroom sessions. This gives the student the experience which helps them understand and relate to the classroom material.

Rarely do we cancel a clinic, but if we do, please bear with us. We will reschedule as soon as possible. A message will be left on our voice mail by 7:15 a.m. the day of the clinic notifying you of cancellation or delay.

16 Technology Drive Suite #130 ◊ Irvine, CA 92618 ◊ 949 341-0031 ◊ Fax: 949 753-0420  
Visit our Web site at [www.masterdrive.com](http://www.masterdrive.com)

# **PERSONAL / AUTO CHECKLIST AND GENERAL INFORMATION**

## **ARRIVAL AND PICK UP:**

- ✓ All training times are sent with the confirmation letter. We require that you arrive no later than 15 minutes prior to the start of class.

**We encourage parents to attend the “recital” held during the last hour (usually 4:00-5:00pm) on the second day of Two-Day Skills Clinics.** This will give the parents the opportunity to observe their teen’s newly acquired skills and to ride with the new driver through the exercises (parents and teens willing) an experience both parents and teens should not miss!

## **DRIVER PREPARATION:**

- ✓ Tennis shoes or any flat soled shoes. Thick soled shoes/boots are strongly discouraged.  
**“Flip-Flops” or loose fitting sandals are a safety hazard and are not allowed!**
- ✓ Weather resistant jacket/coat.
- ✓ Sunglasses, sunscreen, hat.
- ✓ Snacks and/or lunch with beverages.
- ✓ Please leave all personal items at home. MasterDrive is not responsible for any lost or stolen items.  
i.e. ( cell phones, iPods, etc..)

**During the Two Day Skills Clinic and Classroom sessions there are no food or refreshment facilities readily available. Please bring a "Brown Bag" lunch, to include several beverages each day.**

## **CAR PREPARATION:**

- ✓ Check fluid levels (oil, coolant, transmission).
- ✓ Check tires (air pressure, visible tread).
- ✓ Check wheels (covers secure, lug nuts snug).
- ✓ Check brake pads - brake fluid level.
- ✓ Check for firm brake pedal, brake lights operational.
- ✓ Seat belts (YOU MUST WEAR THEM).
- ✓ Any loose or hazardous objects removed from interior and cargo area.
- ✓ Gas tank at least 3/4 full.
- ✓ Battery adequately secured.

## **RECOMMENDATIONS:**

- ✓ Brakes should be bled and fluid changed annually.
- ✓ Car should be in proper alignment.
- ✓ Manufacturer tire pressure recommendation should be noted.

YOU SHOULD ADD 4 TO 5 LB. ABOVE RECOMMENDED PRESSURE PER TIRE SPECIFICALLY DURING CLASS. YOU WILL BE PUTTING THE CAR INTO SOME STRESS, AND THEREFORE THERE WILL BE SOME LIMITED WEAR ON THE TIRES.

**Safety is always our first priority - An unsafe vehicle may be removed from the clinic.**

# **APPLICATION FORM**

Student's Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

High School \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
If attending Mo/Day/Yr

Parent(s) if student under 18 \_\_\_\_\_

Phone Numbers (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Fax \_\_\_\_\_ e-mail \_\_\_\_\_

For many years, MasterDrive has stood alone in providing an absolutely unique service for anyone who has special needs in learning to drive. Driving Safety is the ultimate objective of the MasterDrive program, and the safety of a new driver is totally dependent upon the quality of the essential executive functions related to driving. These functions include: balance ... multi-tasking ... focus and concentration ... the ability to understand and follow instructions ... visual processing and visual spatial awareness ... reaction time, etc.

Therefore if, as a parent, you believe that your teen needs access to this special training for any reason, please let us know and we will discuss the program options and schedule a strategy session with your family.

It would help the learning to drive process of my son/daughter for you to be aware of the following things:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I/we understand that if, in the opinion of MasterDrive, the risk of the process is not acceptable, MasterDrive will terminate the training immediately, in the interest of everyone's safety.

Signed: Parent: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\* PAYMENT \*\*\*\*\*

**Please disregard this section if you have pre-paid with one of our customer service representatives.**

Amount of Payment Enclosed \$ \_\_\_\_\_ Check \_\_\_\_\_ Discover \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_

If using credit card: Account # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp Date \_\_\_\_\_

V# \_\_\_\_\_ (last 3 digits in signature block on back of card) ZIP Code CC bill is sent to \_\_\_\_\_

Name \_\_\_\_\_  
As Printed on Card Signature

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**Remember, to avoid rescheduling, we must receive the following at least five days prior to the clinic.**

\_\_\_ This Application Form \_\_\_\_\_ Completed Automobile Safety Inspection  
\_\_\_ Signed Waiver of Liability and Release \_\_\_\_\_ Current copy of insurance identification card

## **WAIVER OF LIABILITY AND RELEASE AGREEMENT**

**The undersigned hereby acknowledges his or her understanding that there are risks inherent in the process of learning to drive, and in driving a vehicle, and that while MasterDrive has taken and will take every precaution to minimize such risks and to maximize the safety of MasterDrive students, trainees and participants, some risks understandably remain, and cannot be controlled by MasterDrive or its teachers, coaches, employees and agents.**

In consideration of the above, and of the undersigned participant's ("Participant") attendance at and/or participation in a MasterDrive training program, Participant hereby agrees as follows:

1. I hereby knowingly and voluntarily waive forever any and all liability on the part of, and covenant not to sue or institute any claim against MasterDrive, its agents, instructors, insurers, lessors, successors, or assigns, or of any sponsor (collectively "MasterDrive"), resulting from or arising out of or in connection with my attendance at and/or participation in a MasterDrive training program. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless MasterDrive from any and all claims, demands or causes of action, which allege negligent acts or omissions of MasterDrive, unless such negligent acts or omissions are found by a court of law to constitute willful, wanton or gross negligence.

2. I warrant and represent that I personally, and my vehicle, are fully insured and will at all times during the period of my participation in the MasterDrive training program continue to be fully insured in accordance with applicable state law; and in addition, that I have both personal liability and property damage coverage deemed by me sufficient and adequate to cover any exposure to me, my vehicle, or the property or person of others, arising from participation in the MasterDrive program.

3. I acknowledge that the development of driving skills entails known and unanticipated risks which could result in physical and/or emotional injury to myself and/or third parties, and damage to my property and/or the property of others. I understand that while every effort is made to reduce them, such risks simply cannot be eliminated without jeopardizing the essential elements of this type of driving skills training.

4. I acknowledge that I must accept and assume all of the risks of my individual actions and responsibilities, and those existing in this type of training activity. I therefore accept and assume full responsibility for my actions during all MasterDrive training, and during such time periods and locations which are within the scope of such training (including but not limited to classrooms, parking lots, etc.). It is understood that MasterDrive will not accept responsibility for the actions and/or mistakes of any participant. Participant's attendance is voluntary, and he or she elects to participate in spite of the inherent risks explained above.

5. Should MasterDrive or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, Participant agrees to indemnify them for all such fees and costs.

6. By signing this document, I acknowledge that if I am injured or if my property is damaged during my participation in this training, I may be found by a court of law to have waived my right to maintain a lawsuit against MasterDrive, its agents, instructors, insurers, sponsors, employees, successors and assigns.

Date: \_\_\_\_\_

\_\_\_\_\_  
Participant's Signature (if 18 years old or older)

\_\_\_\_\_  
Parent's Signature (if Participant is under 18 years old)

# **AUTOMOBILE SAFETY INSPECTION**

STUDENT (name) \_\_\_\_\_ DATE \_\_\_\_\_

CAR MAKE/MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_

LICENSE PLATE # \_\_\_\_\_ MILEAGE \_\_\_\_\_

INSPECTION PERFORMED BY (COMPANY) \_\_\_\_\_

INSPECTOR SIGNATURE \_\_\_\_\_

\* \* \* \* \*

## **SAFETY INSPECTION**

\*THIS VEHICLE INSPECTION MAY BE PERFORMED BY ANY LICENSED REPAIR FACILITY  
SOME FACILITIES WILL DO IT FREE OF CHARGE.

**OVERALL SAFETY:**         **PASS**         **FAIL**

### SUSPENSION

P F Shocks

P F Steering

Is the suspension lifted from stock, or lowered enough to compromise suspension travel?    Yes No (Yes = Overall Fail)

### BRAKES

P F Pads or Shoes

P F Parking Brake \*tight / adjusted\*

P F (P.B. locks **both** rear wheels!)

P F Hydraulics

### INTERIOR

P F Seat belts fully functional (L and R)

P F Seat Secure

P F Seat adjustment controls function

### ENGINE COMPARTMENT

P F Battery Secure

P F Gas Lines

P F Fluid Levels

P F Engine Cooling Fan

### WHEELS

P F Tire Condition

P F Tread Depth (minimum 1/32nd)

P F Lug Nuts

P F Tire Pressure

P F No Studded Tires

### TRUNK

P F No Loose Objects

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INSPECTOR'S COMMENTS:

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