STEP BY STEP

SAMPLE REGISTRATION PROCESS

As of September 8, 2023

When Registration opens at 10:30am an additional button will appear on our New Driver Program page labeled "Information/Registration". After you click on the Information/Registration button, it will take you to a page with additional information and buttons with the class start dates that will be available for registration.



More Information

Click on the start date for which you would like to register. Then, you will be taken to the registration form. However, if you click on the button and it says "Form is Disabled", the session is full. Your students spot is not held until the registration form has been submitted and deposit is complete.



Fill out the registration form with the appropriate information. When you click "Submit", the form will either take you to the payment information or if the session has filled before you click "Submit", it will say "Form is Disabled". If you receive a continuous "Please Wait" pop up, the session is already full. See the example of the Registration form below.

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Students Name *	
John	Doe
First Name	Last Name
Middle Initial *	
A	
^	
Date of Birth	
01-01-2004	
E	XANAD
Gender *	WINDLE
Male	
Main Phone Number *	
(123) 456-7890	
Please enter a valid phone number.	
Main phone *	
Mom Cell	
Main Phone Carrier *	
US Mobile	
Used to send a reminder text about final regist	ration.
Secondary Phone Number *	
(234) 567-8901	DIE

	Secondary Phone *			
	Dad Cell			
	Address *			
	9876 Sample Rd.			
	Street Address			
	NE			
M	"eet Address Line 2			
EXA	Dayton		ОН	
	City		State / Province	
	45429			
	Postal / Zip Code			
	Highschool *			
	Centerville High School	EXA	MPIE	
	Email *			
	sample@gmail.com			
	example@example.com			
	Parents/Guardian Names			
	John/Jane Doe			
	John/Jane Doe			
	Does the student currently have	e their Temp	orary Permit? *	
	O Yes			
	O No			
	Have you had a previous studer Previous Student's Name *	nt attend Pro	fessional Driving Systems? If Yes,	
	No			
	Would you like to be placed on t	the Waiting I	.ist for an earlier Class Start Date? *	
	Anything	-		
		EX	AMADI	
11			THE It's free!	

	Package Options (Choose One)
	32 Hour New Driver Program \$625.00
	32 Hour New Driver Program + Skid Control Training \$700.00
	32 Hour New Driver Program + Skid Control Training + 1 hour Test Prep \$750.00
	How did you hear about Professional Driving Systems?
	Word of Mouth
	Do you have any questions or comments?
	No
	Name as it appears on Credit Card *
	John Doe
-XA	Requirements students MUST meet to BEGIN classes
EV.	-Student must hold a valid temporary license for a minimum of 3 weeks
	prior to class start date
	-Student must have a minimum of 10 hours of on road behind the wheel
	driving with a parent or legal guardian.
	-Students must log their driving time and present it to the office prior to
	class start date.
	EXAND
	I I I I I I I I I I I I I I I I I I I
	I understand if my student does not meet the requirements listed above for the session I am currently registering for, my registration will be moved to a later session based on availability.

Continue to Payment

If the form leads you to the payment information you will select the amount you would like to pay, this page will redirect you to the payment portion. While on the next 2 steps you will be receiving your first of three confirmation emails showing your registration. The students spot is not offically reserved until the deposit has been submitted.



Once you click on the amount you would like to pay, it will direct you to the payment portion. Fill out the credit card information and click "Continue".

	Secure Transaction
Billing Information	
First Name:	
Last Name:	
Company Name:	
Address:	
City:	
State/Province:	- Select State - 🗸
Zip/Postal Code:	
Phone Number:	
Fax Number:	
Email Address:	
Website Address:	
Additional Information	
Student Full Name :	
	Continue

Please review your billing information and the amount you selected to pay. Fill out your credit/debit card information and click "Complete Order".

Payment Information

Billing Information	
John Doe 9876 Sample Dr Dayton OH 45429 P: 1234567 E: Sampleemail@gmail.com	
	Edit Address Information

Order Information	
Order Description:	New Driver Program Deposit
Order Amount:	100.00

Secure Transaction

Credit Card		
Credit Card Number:		
Credit Card Expiration:		
Card Security Code:	(What is this?)	
		Complete Order

Within an hour, you will receive a second confirmation email showing your payment. Once you receive your second email your spot is confirmed and you will receive a third confirmation email from Professional Driving Systems within 5-10 days. The third email will include all of your session information, a deposit receipt letter, a class calendar and additional documents.