

Date

I, as parent/legal guardian of	, give permission to Burgess
	instruction (1 student & 1 instructor per vehicle) to the
_	90 minutes per lesson. I understand all instructors of
Burgess Driving School have satisfied the	e minimum requirements of the State of Illinois
regarding certifications for instruction ar	nd are employed and are representatives of an Illinois
state licensed school, specifically, Burges	ss Driving School, located at 111. W. Washington St –
Suite 220, East Peoria, IL 61611. Furthermore, I understand that each private session is video	
and audio recorded on the outside and i	nside of the vehicle using a dash mounted camera for
the sole purpose of protecting both the	driver and student with a record of the event from star
to finish.	
	-
Parent/Legal Guardian Signature	
Parent/Legal Guardian Name (Printed)	