



**PIONEERS Co-op – Segment II Session (3 Days)  
Ganson Street Baptist Church – Room #206  
637 W. Ganson Street, Jackson, Michigan**

**Monday & Tuesday, November 8<sup>th</sup> & 9<sup>th</sup> and Thursday November 11<sup>th</sup>. 9 AM – 11 AM (Doors open at 8:45)**

**E-Z Way Segment II** Driver's Education class consists of (3) two-hour sessions of instruction. The course will discuss defensive driving, drinking and driving, road rage, and will help to prepare the student for their Road Test. The Course instructor is Mr. Greg Moran. Mr. Moran is a PIONEERS tutor and licensed driving instructor with the State of MI. He can be contacted at via text or phone at 517-581-5621.

**Pre-requisite:** Driver must hold a valid Level I License with an *issue date at least three months prior to Day 1 of the class* and has acquired 30 hours of driving experience time including a minimum of two hours of night driving. *\*Driving Log must be presented on day one of class.*

The cost is **\$65/student Non-Pioneers Members and \$60/Student – Pioneers Members**. Checks should be **made payable to PIONEERS Co-op**, 2707 Walcott Road, Jackson, MI 49201. Registration will be on a first-come, first-serve basis, and is due no later than OCTOBER 13. (EZ Way now requires a **minimum 14 day notice** for all students registering). Please submit this form with payment to insure your student's registration. Space is limited, so please get your registrations in as soon as possible.

Consistent with Segment I Classes, GSB Building Policy requires one additional adult in attendance each session day. Please indicate below, if you are NOT available to assist on any given day, and you will be notified if you are needed. For additional information, please contact Patti Sailor 517-262-6686 or [kpsailor79@gmail.com](mailto:kpsailor79@gmail.com).

Student Full Legal Name \_\_\_\_\_

DOB \_\_\_\_\_ Cell Phone # \_\_\_\_\_

**Level I License #** \_\_\_\_\_

**Level I License Issue Date** \_\_\_\_\_

\*Parent Signature \_\_\_\_\_

Email Address \_\_\_\_\_

Parent Name (Please Print) \_\_\_\_\_

Mailing Address \_\_\_\_\_

\*I (Parent) am **NOT available** to aide on: **Monday (11/08)** \_\_\_\_\_, or **Tuesday (11/09)** \_\_\_\_\_, or **Thursday (11/11)** \_\_\_\_\_

**\*\* PAYMENT INFORMATION - \$65.00/Non-Pioneers Members & \$60.00 Pioneers Members**  
Payment Date \_\_\_\_\_ Check #/Money Order \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_  
*\*Please make checks payable to PIONEERS and mail to:  
Pioneers Support Services, 2707 Walcott Road, Jackson, MI 49201*