



FORM FOR AIKEN DRIVING CLUB

SPRING FLING CLINIC

MARCH 2, 2024

PAUL & SUE DOUGHERTY'S

551 SPRING BRANCH ROAD

WINDSOR, SC 29856

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Please send this form, the Aiken Driving Club waiver and a check for \$10 made payable to: Aiken Driving Club to

Diane Mansur

PO Box 207

Windsor SC 29856