



DRIVER Z PARENTAL CONSENT FORM

Applicant Name: Last Name All Given Names

E-mail Address: I agree to receive course correspondence at the following email address

Please initial here to provide consent to receive emails:

Enrolled school:

Applicant and Co-Signature Authorizations

- 1. I authorize Manitoba Public Insurance ("MPI") to use the applicant's personal information, including the applicant's personal health information, to:
a. Administrate the Driver Z Program (the "Program");
b. Verify the applicant's eligibility to participate in the Program; and
c. Confirm the ongoing validity of the applicant's driver's licence.
2. I authorize MPI to access the Insurance Work Station to conduct searches of the applicant's driving history abstract in order to:
a. Verify the correctness of the applicant's name as it appears on this application;
b. Verify the applicant's eligibility to participate in additional driver education programs run by MPI;
c. Confirm the ongoing validity of the applicant's driver's licence;
d. Send the applicant correspondence associated with the Program; and
e. Conduct annual assessment of the impact of the Program on the applicant's driving habits and driving record.
3. I agree to the disclosure of the applicant's course information in the Driver Z online website to the applicants' co-pilots, parents, and legal guardians, and to the disclosure of the status of the applicant's driver license and Program progress to the applicant's parents and legal guardians.
4. I acknowledge that this application is the first step in the process of the applicant applying for a Manitoba driver's licence and authorize MPI to take a photo of the applicant, and to have the applicant's identification documents verified to determine eligibility for the licence.
5. I agree to fully reimburse MPI for all traffic infractions, tickets, or fines incurred by the applicant while operating a Driver Z training vehicle, including but not limited to infractions captured by traffic enforcement cameras, and that the failure to pay the full amount of the ticket or fines by the applicant, parent, or legal guardian of the applicant may result in collection actions being taken by MPI against the applicant, parent, or legal guardian of the applicant, and/or suspension or expulsion of the applicant from the Program without a refund.
6. I acknowledge that I am aware that the Program instructors are independent contractors retained by MPI and are not officers or employees of MPI. I do hereby waive any right of action, for any cause whatsoever, which I may now, or at any time in the future, have against MPI, or its directors, officers, shareholders, employees, subcontractors, partners, volunteers, agents, delegates and other representatives, arising out of the participation in the applicant in the Program, or arising out of an incident or incidents occurring during the course of the Program resulting in the injury, disability, or death of the applicant (apart from any benefits to which the applicant, parent or legal guardian, may become entitled to pursuant to the Personal Injury Protection Plan).
7. I hereby acknowledge that I have read, understand, and agree to these terms and conditions for the applicant's enrolment in the Program, the course requirements, and the conditions by which a learner's ("Special" Class 5) licence may be acquired and cancelled. I agree to comply with MPI's Driver Z Program Registration Guide, as published on the Manitoba Public Insurance website, which shall be incorporated as additional terms to the Driver Z application.

Applicant Only Authorizations

- 1. I agree that any school computers used in the Driver Z Class 5L test will be used for the sole purpose of accessing an MPI website and completing the Class 5L Driver's Knowledge Test. Any other use whatsoever during testing may result in my immediate expulsion from the Program. I also agree that I shall be responsible for any damage I may cause the room, equipment, or network in the computer lab and will abide by any other rules that are posted in the school computer lab.
2. I agree to notify MPI of any changes to my school enrollment information listed above that occur prior to my completion of the Program.
3. I understand that my parent or legal guardian has the right to submit, in writing, a request to the Registrar to cancel my licence while I am minor.
4. I understand that if I fail the Program, or withdraw from or are removed from the Program prior to successfully completing the Program, my driver's licence may be cancelled in accordance with The Drivers and Vehicles Act (Manitoba).

Co-Signature Only Authorizations

- 1. I grant permission to the applicant documented in this form to apply for driver testing services online. Yes [ ] No [ ]

Signature of applicant

Co-signature

Date