

Teen Driving Contract

1. The **PURPOSES** of this contract are to acknowledge the risks of teen driving, state what is expected of the teen driver, and spell out up-front what happens if the contract is violated.
2. Your contract must be consistent with your state's laws, but it can be stricter.
3. Write a draft of this contract when your teen gets a learner's permit. Finalize it when your teen gets a license.

SAFETY RISKS

INITIALS

1. Driving is the leading cause of death of people under age 20.
2. Driving can cause injury, death, and damage and can result in criminal charges.
3. Teen driving is dangerous because the brains of teens do not yet fully appreciate risk and danger, and it takes several years of experience to create a safe driver.
4. Every passenger in a teen's car increases the crash risk.
5. Using a distracting electronic device, driving under the influence of alcohol or any illegal drug, speeding, reckless driving, and driving without seat belts risk the life of the driver, passengers, drivers of other cars, and pedestrians.

SUPERVISING ADULT'S OBLIGATION

INITIALS

I understand that I am a role model for this teen driver, and I will teach safe driving habits and be a safe and responsible driver at all times.

TEEN DRIVER OBLIGATIONS

1. **"Driving Plan."** I will drive only with permission from an adult supervising this contract. I will follow a specific route and arrival and return time. I understand that "joyriding" is prohibited.
2. **Adult Supervision.** Each adult supervising me will use his/her judgment on a day-to-day basis about whether to grant permission to drive.
3. **Violations.** Driving under the influence of alcohol or an illegal drug; texting or using an illegal electronic device; speeding; other reckless conduct; or driving without each passenger wearing a seat belt shows a disregard for safety and will result in suspension of my driving for ____ days. Driving without a Driving Plan; carrying an illegal passenger; or violating a curfew will result in suspension of my driving for ____ days.
4. **Texting or Cell Phone Use.** Before texting or using a cell phone, I will drive to a safe place and stop.
5. **Violation of Suspension.** If I drive while my license is suspended by this contract, I will lose all driving privileges indefinitely.
6. **Other Suspensions/Penalties.** I understand that if my license is suspended under this contract, this will be in addition to any suspension, fine, penalty, or retraining required by government or law enforcement.

7. **Curfews.** I understand that our state law does not allow me to drive after ____ p.m. or before ____ a.m..
8. **Curfew Exceptions.** If I need to be out past a curfew (such as returning from a job or school later than the state's curfew), I will *(for example, obtain a letter, to be kept in the vehicle, from the teen's employer or school)*: _____
_____.
9. **Time Period for this Contract.** *(Recommended minimum: one year; Alternative: "one year or until the teen's 18th birthday, whichever is later.")* This contract will remain in effect until _____
_____, and will be changed only if state law changes.
10. **Suspension Procedure.** *(Specify what happens to the license, keys, and vehicle, and whether a steering lock will be used.)* If my driving is suspended or I must go back to learner's permit mode (no solo driving), the procedure will be: _____
_____.
11. **Technology.** *(Specify any device that will be installed in the car to install to track information about the teen's operation of the vehicle.)* _____
_____.
12. **Finances.** For the time that this contract is in effect, the costs of insuring, fueling, and maintaining the vehicle will be divided as follows: _____
_____.

MEDIATOR

Mediator. We appoint _____ to serve as mediator. If a dispute arises about this contract, we will ask the mediator for advice.
(Contact number: _____)

COMMITMENT

By signing below, we commit ourselves to the safe driving requirements, procedures, time periods, and understandings stated in this contract.

TEEN DRIVER _____

Contact number: _____ Date: _____

SUPERVISING ADULT _____

Contact number: _____ Date: _____

SUPERVISING ADULT _____

Contact number: _____ Date: _____

SUPERVISING ADULT _____

Contact number: _____ Date: _____