



TRAINING COMPANY INC.

STATE OF TEXAS

**Course Developed By:
USA Training Company Inc.
8871 Tallwood Drive
Austin, Texas 78759**

**No copyright is claimed on that portion of this work
which is original government statutes or rules.**

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While the driving techniques described in this course are generally accepted and considered safe, each driver should make certain that the manner in which he or she operates a motor vehicle is safe, taking into account the particular circumstances of any situation.



AGENCY REGISTRATION APPLICATION
USA DRIVER SAFETY COURSE - INSURANCE / SAFETY TRAINING ONLY

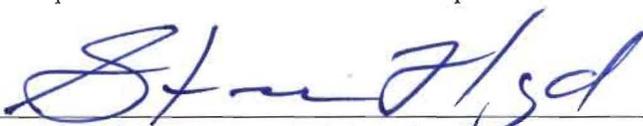
1. Name of Agency: Tom Green County
2. Administrative Staff Person (Contact Person): Marion McMinn
3. Agency Address: 124 W. Beauregard San Angelo TX 76903
Street City/State/Zip
4. Mailing address: Same
Street City/State/Zip
5. Telephone Number: (325) 659-6407
6. FAX Number: (325) 658-7871

INSTRUCTOR ROSTER:

List all instructors who will be teaching the USA Driver Safety Course at your agency:

NAME AND ADDRESS TO INCLUDE CITY, STATE & ZIP		DL#
NAME: <u>Marion McMinn, Risk Manager TDLR # 2669</u>		<u>TX 07064078</u>
ADDRESS: <u>124 W. Beauregard San Angelo, TX 76903</u>		
NAME:		
ADDRESS:		
NAME:		
ADDRESS:		
NAME:		
ADDRESS:		
NAME:		
ADDRESS:		

I affirm that all information provided on this application is true and correct and that the agency shall be operated in compliance with all USA rules and policies.


Signature of Owner or Administrative Staff Person

3-27-16.
Date



USA TRAINING COMPANY

OPERATORS AGREEMENT

This agreement, by & between USA Training Company Inc. (US) and Tom Green County is as follows:
(Name of Agency)

I desire to be authorized to present the USA Driver Safety Course. In consideration of USA's authorization (so long as I comply with this contract) it is agreed as follows:

- The name "USA Training Company Inc." and its logo belong solely to USA.
- I understand the Class Registration must be mailed to USA upon completion of each class.
- I agree to purchase USA Insurance Only certificates from USA Training Company at a cost of \$3.00 per certificate.
- I agree to issue an Insurance Only certificate to each student taught.
- I agree to notify USA Headquarters within 5 days of any change in mailing address or phone number

The term of this agreement shall be for a period of 1 year. Unless either party notifies the other in writing at least 60 days prior to the end of the then-current term of this agreement that such party does not desire to renew this agreement, it will automatically be renewed for one year.

Notice to either party under this agreement shall be sufficiently given on the third calendar day after being sent by certified mail, return receipt requested, postage prepaid, or when actually received if delivered by electronic facsimile transmission (provided that it is received prior to 5:00 p.m.) or by courier, to that party at its respective address as set forth below. Upon any termination of this agreement, operator will immediately return all materials to USA and cease using the USA initials or logo.

(a) If to USA:
 USA Training Company Inc.
 8871 Tallwood Drive
 Austin, Texas 78759
 FAX: (512) 346-0431

(b) If to Agency:
 Name Tom Green County
 Address: 124 W. Beauregard
 City/State/Zip: San Angelo TX 76903
 Fax: 325-658-7871

As used in this agreement "I" and "My" means the agency representative designated above.

This instrument represents the entire agreement between the parties with regard to the subject matter hereof. It may be amended only by a written instrument signed by both of the parties hereto. This agreement shall be binding upon and inure to the benefit of the parties, their successors and assigns.

Executed effective the _____ day of _____, 20____.

USA TRAINING COMPANY INC.

By: _____
Janis Helm

By: _____
Phil H. Ward

Tom Green County
 Agency Name
 By: [Signature]
 Agency Representative



CERTIFICATE ORDER FORM

USA INSURANCE CERTIFICATE

Date: _____

Please mail **USA Insurance Only** certificates to:

Your Name: _____

Agency Name: _____

Address: _____

City/State/Zip: _____

Telephone: (_____) _____

_____ certificates @ **\$3.00 each** = \$ _____

Check number _____ is enclosed for the amount of \$ _____

**MAIL ORDER FORM AND CHECK PAYABLE TO "USA" TO:
USA Training Company, 8871 Tallwood Drive, Austin, Texas 78759**

NO TELEPHONE ORDERS WILL BE PROCESSED
All certificate orders will be mailed regular U.S. Mail

OFFICE USE ONLY:

Payment Recd: _____

Check No. _____

Date Mailed: _____

Sent via: _____

Cert #s: _____