

PARKING PERMIT

No permit will be issued without the following:

- Completed application
- Proof of Driver's License
- Vehicle Registration
- Proof of Insurance
- \$15 permit fee

Student Information

Last Name: _____ First Name: _____ MI: _____
Address: _____ Grade: _____
Phone: _____ Parent Phone: _____

Vehicle Information

Make: _____ Model: _____ Year: _____ Color: _____
Tag #: _____ State: _____ Driver's License #: _____
Insurance Co.: _____ Policy #: _____ Exp. Date: _____

Parking Agreement

I have been issued the above parking sticker and understand that it must be hung from my rear view mirror. The tag must be visible for the administration and School Resource Officer to view. I agree to abide by parking lot rules and regulations. I also understand that this parking permit is nontransferable to any other vehicle and consequences will be received for violation of parking rules.

Student Signature

Date

Parent Signature

Date

Amt. Paid: _____ Check #: _____ or Cash _____ Permit #: _____