

2018-2019 PARKING APPLICATION
(Please Print)

Name _____

School ID # _____ Grade _____ Driver's License # _____

License Plate # _____ Make/Model _____ Color _____

2nd Car Plate # _____ Make/Model _____ Color _____

Car is registered to _____

The undersigned student and parent have read and understand the parking regulations. In doing so, they agree to abide by these rules and fulfill the responsibilities outlined. We understand that failure to follow these rules when parking on school property may result in one or more of the following: vehicle towed at the owner's expense, car ticketed and/or stickered, disciplinary consequences, and/or privilege revoked without a refund.

Student Signature _____ Date _____

Parent Signature _____ Date _____

----- **FOR OFFICE USE ONLY** -----

Tag # _____

Received \$ _____ CK# _____ Date: _____
Refunded \$ _____ CK# _____ Date: _____