## STUDENT VEHICLE REGISTRATION

	Vehicle Registration Tag ID #			
Student Full Name:			Age:	
Last	First	Middle		
Address:Street City	Zip Code		Phone: ( )	
·	•			
Driver's License #:			ate #	
Year Make of Vehicle	e M	odel	Color	
Insurance Provider:	Ir	nsurance Poli	licy Number:	
	es must be locked	d and left unat	authorized parking permits during school attended from the time the student arrives udents, MUST sign out of the office.	
In emergency situations special p to a vehicle during school hours.	permission must b	e obtained fro	om the principal or vice principal to return	
<ol> <li>Students will NOT be allowed to pa</li> <li>In Elementary staff parking p</li> <li>On the grass or school sides</li> <li>In the roadway between Ele</li> <li>High School Faculty Parking</li> <li>Only the students who are in the staff parking spaces</li> </ol>	places (row close walks mentary and Higl g Lot	st to Element		
parking, honking on the horr 2. Students who violate motor	n and/or blocking vehicle regulatior he school manua	the flow of trans will be give	en a \$10 fine and will follow the disci- ust be paid before returning to class the	
	ntinue driving his/	her vehicle to	keys to the office upon arrival of the cam- o school. More serious infractions may re- ouncil.	
			ability insurance during the entire school ne event of any changes in my vehicle in-	
Legibly Print Student Name	 Student Sig	ınature	/ Date	
			/ /	
Legibly Print Parent/Guardian Name	Parent/Gua	rdian Signature	Date	
Parent authorization to transport of students to and from school at the			ion for my student to transport other school day.	
Legibly Print Parent/Guardian Name	 Parent/Gua	rdian Signature	e Date	
			Rev. 5/11/11	