"Responsible Caring Citizens serving Responsible Caring Citizens"

Student Parking Permit Registration Form

Student Name:	F	Phone No:	
Address:			
Homeroom:	(Grade:	
Year/Make/Model/Color	License Plate #	<u>Owner</u>	
 * A driver's license must acco * Please note: If any of the ab responsible for updating the 	information at the office.	ling a change in vehicle, you are e discretion of the building principal	
Parent Signature:		Date:	
Student Signature:		Date:	
ADMINISTRATIVE USE ONLY – signatu			
[] Copy of license [] Pa	rking Permit Issued [Parking Permit Number	
Administrator Signature:		Date:	