



## STUDENT PARKING LOT REGISTRATION FORM

Name \_\_\_\_\_ Grade \_\_\_\_\_ Birth date \_\_\_\_\_  
Vehicle make, color & year \_\_\_\_\_  
Car License plate # \_\_\_\_\_  
Vehicle Registered to \_\_\_\_\_  
Lot # \_\_\_\_\_

***I must have a registered vehicle, which I drive daily.***

***I hereby agree to follow all the rules set out below or I will lose my student parking lot privilege.***

***I will lose my parking lot privilege for the remainder of the school year or following years if I break any of the following rules:***

- allow someone else to use my parking space;
- parking tag is not visible;
- my parking space is vacant for over three days without Mrs. McCarville's knowledge;
- illegally park (park in faculty, gravel lot or another student's space);
- have four tardies to school (per semester);
- receive a truancy (see explanation of truancy in your student handbook);
- speed;
- did not refile a new registration form on a vehicle change;
- an attempt to misuse or misrepresent my parking lot.

***Illegal parking is a half-day Saturday suspension.***

\_\_\_\_\_  
**Student's Signature**