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|  |  |  |  |
| Last Name | First Name | Student ID# | Parking Tag # |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Date of Birth | License Plate# |  Make# |  Model | Year |

|  |  |
| --- | --- |
|  |  |
| Parent/Guardian Signature | Date  |

|  |  |
| --- | --- |
|  |  |
| Student Signature | Date  |

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| **By signing this agreement, both, the student and the parent/guardian, agree to have read and understand the student parking lot terms and conditions.**  |

|  |  |
| --- | --- |
| Approved and cleared by Administrator  |  |

|  |  |
| --- | --- |
| STUDENT PARKINGVEHICLE INFORMATION | PARENT PERMISSION |

2020-2021

