Name:,	Receipt:
Last	T II St
Student ID Number	Insurance:
Grade: Driver's License:	
Car's plate number:	Car Make
Insurance Company:	Car Model
Policy number:	Car Color
I agree to abide by all driving laws and be respectful of marked student parking space. If I park in a visitor, campus during school hours without permission, I will parking on campus. I understand the school and/or soccurs to my car. I MUST NOTIFY THE ADMINISTRA	faculty parking or behind the gym, or if I leave I be subject to a fine and/or loss of privilege of school district is not responsible for damage that
1st offense: Warning sticker 2nd offense: \$15 fine 3rd offense: \$25 fine 4th offense: Towed at owner's expense and	
Fines are paid through the Student Accounts Office in the student store.	
Student Signature:	
Parent/Guardian Signature:	
Parking permits are \$10.00 payable to CHS Students Store.	
To receive a parking permit you will need to do the following:	
 Make a photo copy of your license. (a copier is a 2. Pay \$10.00 and get a receipt from the Studen 3. Fill out this Parking Permit Form COMPLETELY. 	
BRING to Mrs. Muzzi in the Administration	n Building:
 Bring the <u>photo copy of your license</u>. Bring your proof of auto insurance. Bring Student Store receipt. Bring this completed form. 	

ISSUED PARKING NUMBER _____ ENTERED____