



CHS Parking Permit Agreement: 2014-2015

Name: _____, _____
Last First

Student ID Number _____

Receipt: _____
DL: _____
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 other drivers and pedestrians. I will park in a marked student parking space. If I park in a visitor, faculty parking or behind the gym, or if I leave campus during school hours without permission, I will be subject to a fine and/or loss of privilege of parking on campus. I understand the school and/or school district is not responsible for damage that occurs to my car. **I MUST NOTIFY THE ADMINISTRATION OFFICE IF I CHANGE CARS.**

- 1st offense: Warning sticker
- 2nd offense: \$15 fine
- 3rd offense: \$25 fine
- 4th offense: Towed at owner's expense and parking privilege revoked.

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:

DO:

1. Make a photo copy of your license. (a copier is available in the library)
2. Pay **\$10.00** and get a receipt from the **Student Store.**
3. Fill out this Parking Permit Form COMPLETELY.

BRING to Mrs. Muzzi in the Administration Building:

1. Bring the **photo copy of your license.**
2. Bring your **proof of auto insurance.**
3. Bring **Student Store receipt.**
4. Bring **this completed form.**

ISSUED PARKING NUMBER _____ ENTERED _____