

Senior Reserved Parking Application (Form needs to be filled out completely)

August 16th, 2017

9:00 a.m. – 11:30 a.m. & 1:30 p.m. to 4:30 p.m.

\$100.00- Cash Only (Painted Parking)

\$25.00- Cash Only (Regular Reserved)

- Hill Parking Lot (\$25.00)
- Main Student Parking Lot (Painting Parking ONLY)

- Tennis Court Parking (\$25.00)
- Field House Parking Lot (\$25.00)

Name: _____

Student ID: _____

Cell Phone Number: _____

Driver's License: _____

Parents' Name: _____

Parents' Cell: _____

Vehicle Information

Year: _____

Make (Ford): _____

Model (Escape): _____

Color: _____

License Plate #: _____

State: _____

I, _____, understand that I have paid for a Reserved Parking Spot for the 2017- 2018 school year. This parking privilege is not to be shared with friends and only applies to the normal school day, not after school activities. Student Council will monitor the Reserved Parking daily, and if I drive another vehicle to school, I will notify Mrs. Obenhaus by 12:00 p.m. that day. I also know that if I lose my parking tag, a cost \$20 will need to be given to Mr. Stroud in order to issue another tag. I understand that if I park in someone else's reserved space the following consequences will apply:

- 1st parking infraction:** Warning and signature with Mr. Stroud or an assistant principal.
- 2nd parking infraction:** One before or after school detention and parent contact.
- 3rd parking infraction:** One day of In School Suspension and parent contact.
- 4th parking infraction:** Loss of campus parking privilege for 15 days and loss of privilege to apply for Senior Reserved Parking in the future.

I have read and understood the responsibilities of Senior Reserved Parking. I also verify the completed information is true and correct. Submitting false information may result in loss of parking privilege.

Student's Signature: _____

Date: _____