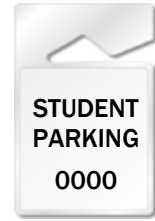


Vancouver School of Arts and Academics

Student Vehicle Registration

2016— 2017



ALL INFORMATION MUST BE COMPLETE AND LEGIBLE (PRINT).

Please return this form and bring proof of insurance (insurance card) to the main office for approval.

Student Name _____ Grade 10th 11th 12th
Last First MI

Registered Owner _____ Home Phone _____
Last First MI

Vehicle Make/Model _____ Color _____ Year _____
(ie Ford/Taurus or Honda/Accord)

Vehicle License Plate # _____ Drivers License # _____
License Plate Driver's License

Insurance Company _____ Agent _____

Agent's Phone _____

In addition to school and district rules, I agree to the following:

- I will park only in designated spaces in student parking lot or as approved by the school administration.
- I will display permit in view from front of vehicle
- I will observe 10 mph limit on school grounds, and not drive recklessly while coming to or leaving campus.
- I will not loiter in the parking lot before, during, or after school.
- I will not leave campus unless a lunch pass is obtained and "in-hand."

Further, I understand that the school and district are not responsible for damage or theft involving cars brought on campus. All vehicles may be subject to search with reasonable cause. Parking privileges may be suspended or revoked at any time, or other consequences may be applied for not following the above rules.

 (Student Signature)

 (Date)

 (Parent Signature)

 (Date)

Office Use

Signature of Approval _____ Date Approved _____ Permit # _____ Received Tag _____ (Initial)
 8/10/2016