

STUDENT DRIVING/ PARKING PERMIT FOR 2017-18 # _____

Yearly cost of permit is \$3.00** (Office Use Only: Check Box If paid)

****Bring last year's parking pass into office and the \$3.00 fee is waived & can reuse for this year!! ☺ MUST bring into office & show Mrs. Baker first!**

Student Name _____ Grade _____

Model of Vehicle _____ Year of Vehicle _____

Color of Car _____ License Plate Number _____

Insurance Company Name _____ Agent _____

Owner of Automobile _____

How often do you drive to school? _____ Daily _____ Occasionally

Driver's License Number _____ Expiration Date _____

Reason for driving to school _____

*List student's names that may be riding with you: _____

PLEASE NOTE >>>If you have additional riders listed (other than a sibling) you are REQUIRED to have a SIGNED PERMISSION NOTE from both your parent and that rider's parent attached with this application BEFORE it may be approved.

RULES

- 1) *Permission to drive will be granted by the Principal*
- 2) *Infractions of school rules will be cause for suspension of driving privileges*
- 3) *Cars must be parked in the designated parking lot*
- 4) *Once parked, a car cannot be entered during school hours without securing permission from the office*
- 5) *Students will drive carefully in and out of the parking lot and on all roadways bordering school grounds*
- 6) *School buses have the **right of way** at all times*
- 7) *If you are told to **stop** by an adult, you must do so immediately*
- 8) *All vehicles can be searched at any time if administration sees fit*
- 9) *All vehicles must have appropriate mufflers. Any "loud" vehicles are prohibited*
- 10) *All vehicles must have safe tire tread. Any vehicle with bald tires are prohibited*

I have read *all* the rules and will abide accordingly _____

(Student Signature)

PARENTAL PERMISSION FOR DRIVING/PARKING

My student _____ has my permission to drive an automobile to school. I have read and approved the Driving/Parking Permit Form as completed by my student. I fully understand the rules and regulations and agree with them. I further agree that Old Fort High School assumes no responsibility or legal liability for the student while he/she is driving the vehicle above. I also understand that the school officials revoked this permit at any time for any valid reason.

Parent/Guardian Signature

Date

Approved by
(Office use only)

Parent/Guardian's Phone/Contact Number _____