

Student Parking Permit Contract

Student Name	Student Vehicle (Year, Make, Model & Color)	Student Vehicle License Number
Student Signature	Student Driver's License # / Exp.	End of Provisional Status Date
Parents Name		Carpool Partner (Licensed Driver Only)
Parent Signature	Today's Date	
Do not write below--		
Registration _____ Expiration _____	Auto Insurance _____ Expiration _____	
(Tier 1, Tier 2, Tier 3)	Fee Paid _____ ck.# _____ cash Date _____	Permit # _____