

**JULIAN HIGH SCHOOL
PARKING AGREEMENT**

DRIVER _____ DRIVER'S LICENSE # _____
DATE LICENSE ISSUED _____ LICENSE PLATE # _____
YEAR/MAKE/MODEL _____
LEGAL OWNER _____ COLOR OF CAR _____
AUTO INS CO _____ EXP DATE _____
*EARLY RELEASE STUDENT? YES NO RELEASE TIME _____

I must provide at time of inspection:

- 1. Valid driver's license _____
- 2. Current vehicle registration _____
- 3. Proof of valid insurance coverage, _____
with name of insurance company and expiration date.

FOR THE PRIVILEGE OF PARKING MY CAR ON CAMPUS:

- 1. I must obtain a student parking tag and will park properly in spaces provided in the student parking lot. In order to obtain a parking tag, I must complete this agreement and comply with the following:
 - a. I must have proof of current insurance coverage. (MUST PRESENT WHEN FORM IS RETURNED). **If insurance expires during the school year, it is my responsibility to show proof of renewed insurance in the office or my permit will be revoked.**
 - b. I will maintain my vehicle in safe operating condition.
- 2. UNDERCLASSMEN-Once on campus I will not leave without permission before my release time, nor will I take any other student off campus at any time during the school day. I will not move my vehicle for any reason during the day without prior approval.
- 3. SENIORS - I will not take any underclassmen off campus at any time during the school day. If I leave early and do not attend activities, I am still responsible for information received during those times.
- 4. I understand the speed limit is 5 MPH in the parking lot. I will drive with care in a safe manner and observe all traffic regulations.
- 5. I understand that the school will not be held responsible for any loss or damage done to my vehicle or its contents while it is parked on campus.
- 6. I will not use my car stereo system as an entertainment center for the campus.
- 7. I further understand that if I violate the conditions of this agreement, my vehicle may be towed and/or I WILL LOSE THE PRIVILEGE OF PARKING MY CAR ON SCHOOL GROUNDS.

Student Signature _____ Date _____

Parent Signature _____ Date _____

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BELOW TO BE FILLED OUT BY SCHOOL PERSONNEL:

Tag # _____ Issued by _____ Date _____