

GREENSBURG CENTRAL CATHOLIC HIGH SCHOOL PARKING PERMIT APPLICATION

Student's Name: _____ Grade: _____

Fill out all sections before submitting this application.
List all vehicles that may be driven during the school year.

| MAKE | MODEL | COLOR | LICENSE PLATE # |
|------|-------|-------|-----------------|
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- PLEASE ATTACH A COPY OF A VALID DRIVER'S LICENSE
- Return completed form to the school office along with the fee of \$20.00. Make checks payable to GCCHS.
- Display permit in vehicle AT ALL TIMES.
- Park in designated areas for students.
- Do not leave the parking lot after school until all buses have departed.
- Do not go to your vehicle during the school day.
- Remember to always lock your vehicle.

Notify the school office immediately of any vehicle or license plate changes.

FAILURE TO COMPLY WITH THE ABOVE RULES WILL RESULT IN LOSS OF DRIVING PRIVILEGES.

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Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

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Parking Permit Number: _____ Cash or Check: _____