



# Aptos High School Parking Permit Application \$25.00

Permit # \_\_\_\_\_  
 Name: \_\_\_\_\_ Student ID: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Make of Vehicle: \_\_\_\_\_ Model: \_\_\_\_\_  
 License Plate #: \_\_\_\_\_ Color: \_\_\_\_\_ Vin#: \_\_\_\_\_ (last 4 digits only)  
 Driver's License #: \_\_\_\_\_ Registered Owner: \_\_\_\_\_ Expires on: \_\_\_\_\_  
 Auto Insurance Company: \_\_\_\_\_  
 Policy #: \_\_\_\_\_ Expires on: \_\_\_\_\_

**Please list any other vehicles the student might be driving to school (There is a \$5.00 fee for each additional car)**

YEAR	MAKE	MODEL	COLOR	LICENSE PLATE #

*Any time a student is out of class and away from where he/she is expected to be (i.e., extensive bathroom breaks) he/she is considered to be out of bounds. Students found Out-of-Bounds in the parking lot or in their cars will have their parking permits revoked after the 2<sup>nd</sup> offense.*

## Parking/Driving

OFFENSE	1 <sup>st</sup> offense	2 <sup>nd</sup> Offense	3 <sup>rd</sup> Offense
Parking violation	Ticket and or loss of parking or other privileges for a specified time	Ticket and or loss of parking or other privileges for a specified time	Ticket and loss of parking and/or other privileges for a semester
Reckless driving and disturbing the peace while driving on campus	Warning Saturday School, parent notification, law enforcement notification, possible Citation	Saturday School, Suspension, parent notification, law enforcement notification, Citation, possible loss of parking privilege	Suspension, parent notification, law enforcement notification, citation, and loss of parking privileges.

I have read the "PARKING AGREEMENT" information and I understand my responsibilities as a student driver on the Aptos High School campus. I agree to obey all school and state regulations/laws regarding driving and parking. I further understand if I fail to obey, my permit may be revoked and the parking fee will not be refunded.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**SUBMIT COMPLETED FORM AND PROVIDE CURRENT, OFFICIAL PROOF OF:**

- YOUR DRIVER'S LICENSE
- CAR INSURANCE FOR THE CAR(S) LISTED ABOVE
- CAR REGISTRATION FOR THE CAR(S) LISTED ABOVE