

Permit #

GFHS VEHICLE REGISTRATION

NAME: _____ GRADE: _____
(print)

YR/MAKE OF VEHICLE MODEL LICENSE PLATE # COLOR

1. _____
2. _____
3. _____

1. You must have an **ASB card, valid Driver's license and insurance**
2. Cars parked illegally (no parking zones, fire lane, blocking other cars, using more than one space) will be towed.
3. Staff parking area is **off limits** (student cars will be towed).
4. Your parking permit **can and will be revoked** for reckless endangerment, reckless driving and or speeding.
5. Only cars with passes will be allowed in the student parking lot.
6. Passes cannot be transferred.

I, _____, being a member of the Associated Student Body of Granite Falls High School, acknowledge that I have a valid Driver's license and **adequate car insurance** and have read the above rules and regulations regarding motor vehicle use while at school.

I realize that failure to abide by these rules may result in a loss of my driving privileges for a specified length of time.

SIGNED: _____

*****SEE BACK MAP ON WHERE YOU CAN PARK****
