

Speedway High School Student Parking Application

Name of Student Driver		(Last)	(First)	(Middle Initial)
Address	(Street Number)	(City)	(Zip Code)	
Phone	(Parents Home No)	(Parents Work No.)	(Parents Cell No)	
Drivers License	(Number)		(Expiration Date)	
Parent/Guardian Address (if different from above)	(Street No.)	(City)	(Zip Code)	
Vehicle No. 1	(License Plate)	(Make of Car)	(Year)	(Color)
Vehicle No. 2	(License Plate)	(Make of Car)	(Year)	(Color)
Insurance Company	(Agent)		(Phone Number)	

I hereby authorize my son/daughter to drive the above described vehicle(s) to and from school and verify that the information on this form is accurate to the best of my knowledge.

I also understand that if it is determined the driving privilege has been abused, his/her driving permit will be revoked by the school administration.

In connection with this request, I consent to the unlocking, opening, and inspecting of the automobile and its contents while on school premises, based on the reasonable suspicion of a school administrator that the vehicle or its contents may violate law or school rules. I also agree to participate in the Speedway High School Random Drug Testing Policy in order to drive to SHS.

Excessive tardiness, truancy, and refusal to follow SHS rules and policies are grounds for revoking a student's driving privilege. This will require the student to arrange alternate transportation, or walk to school.

Parent/Guardian Date

Student Date

Vehicle Permit #1

Vehicle Permit #2

Parking Tag Fees --\$10 per student. Checks may be made payable to Speedway High School