



# General Parking Section Parking Permit For Students

Decal Number (office use only)
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Student Name (first, middle initial, last)	Grade	Student Number
School	Driver's License Number	

Parking decals will be sold based on availability and an eligibility list determined by the principal/designee. In order to obtain a parking decal you must complete this form. This form will not be accepted if any area is blank. A dated, notarized signature from the student and a parent or legal guardian is required. With this completed form, submit the following:

1. Vehicle registration or photocopy of vehicle registration
2. Valid driver's license
3. Valid vehicle insurance card
4. School photo identification
5. A money order or check payable to your school in the amount listed in the school fee schedule.

### VEHICLE INFORMATION

Vehicle Registered To	Vehicle Make	Vehicle Model	Vehicle Color
Insurance Company	Policy Number	Tag Number	

### RULES AND REGULATIONS

Any of the following infractions may result in the loss of campus parking privileges either temporarily or permanently. The cost of the parking permit will not be refunded.

1. The parking decal or hang-tag must be on display through the front windshield and the permit number easily viewed from the outside of the vehicle at all times while on campus.
2. The parking decal or hang-tag must be used for the vehicle identified within this permit. Any changes in vehicle use or specific vehicle being driven must be submitted to the school immediately.
3. Violation of any traffic or criminal laws and/or School District/school rules.
4. Discourteous, reckless, or defiant road behavior.
5. Exceeding speed limit by 5 mph on campus.
6. Unsafe acts, (i.e. riding on car hoods, bumpers, radiators, fenders, spinning wheels, burning rubber, running board, etc.) will result in suspension of parking privileges.
7. Unauthorized vehicles will not be permitted on campus. These vehicles will be towed away at the owner's expense or booted with a \$25.00 removal fee.
8. Students are not permitted to remain in parking lots or to sit in parked vehicles before school, during school, during lunch, or at the completion of the school day.
9. Students are to park in their designated parking lots only. Students are not permitted to park in staff parking lots, visitor lots or in non-designated parking areas.
10. Any student caught duplicating or falsifying a parking permit or transferring the permit to another person will lose their parking permit privilege.
11. A radio, tape player, or other mechanical sound making device or instrument from within the motor vehicle cannot be louder than necessary for the convenient hearing by persons inside the vehicle in areas adjoining the school.
12. Students shall not use cell phones or other wireless devices while driving.
13. Operators of motor vehicles must use seat belts and passengers must use seat belts or child restraining devices as required by law.
14. No student is allowed to ride in the back of a pick-up or flat-bed truck.
15. If an accident occurs on campus and is not reported immediately to the administration by the student(s) involved, then the student(s) will lose their parking privileges for the duration of the school year and/or duration of their enrollment at the school.

**Schools may adopt additional rules.**

**Read the following carefully before signing below.**

I understand that the parking lot is public property, which is under the control of the school. I will prominently display the school issued parking permit on the vehicle designated on this form. I agree that the vehicle the student drives onto property of The School District of Palm Beach County, Florida (The School District) will not be used to transport or store contraband of any kind, nor will the student violate any rules listed in the Student Handbook or the School District Code of Conduct, nor will the student violate any State Uniform Traffic Control or criminal laws. I hereby understand and give the School District of Palm Beach County and the school listed on this form my consent for the principal/designee to search the vehicle the student brings onto School District property upon reasonable suspicion that illegal, prohibited, harmful items or substances, or stolen property may be concealed therein. I acknowledge that refusal to cooperate with the request to search my vehicle shall result in the revocation of the student's parking permit for two (2) years from the date of refusal. If the student's vehicle is on School District property without the appropriate decal displayed, said vehicle may be towed at my expense. Any violation of the above may result in the loss of the student's parking privileges. I also understand that the school listed on this form and The School District of Palm Beach County are NOT responsible or liable for any damage to my vehicle or the contents within it. I have been advised to keep my car locked.

"By issuance of this permit, the School District of Palm Beach County does not assume liability for any property damage to any private vehicle parked on the property. The owner/operator(s) of all private vehicles accept responsibility for their own property and agree that they are parking at their own risk."

\_\_\_\_\_  
*Signature of Student*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Parent/Legal Guardian*

\_\_\_\_\_  
*Date*

**STATE OF FLORIDA, COUNTY OF PALM BEACH**

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (year),  
by (parent's name) \_\_\_\_\_ Who is personally known to me  
or who produced as identification \_\_\_\_\_

\_\_\_\_\_  
*Signature of Notary Public – State of Florida*

\_\_\_\_\_  
*Print, Type, or Stamp Commissioned Name  
of Notary Public, Commission Number and  
Expiration Date*

**STATE OF FLORIDA, COUNTY OF PALM BEACH**

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (year),  
by (student's name) \_\_\_\_\_ Who is personally known to  
me or who produced as identification \_\_\_\_\_

\_\_\_\_\_  
*Signature of Notary Public – State of Florida*

\_\_\_\_\_  
*Print, Type, or Stamp Commissioned Name  
of Notary Public, Commission Number and  
Expiration Date*