



Authorization for On-campus Parking

Please list the make, model, color and license plate # of all the cars that might be driven to school.

- 1. _____
- 2. _____
- 3. _____

On Campus parking is \$100.00 for the year. Your parking pass must be displayed from the car’s rear view mirror at all times while on campus. Penalties for not displaying your parking pass are as follows:

- 1st offense: verbal warning**
- 2nd offense: \$50 fine**
- 3rd offense: Loss of parking privilege**

Student parking is limited to the East parking lot during school hours.

Students leaving during the school day must have parental permission and must present to the office the morning of the appointment a note with a phone number to reach a parent for verification. Students must check-out at the office prior to leaving the campus.

The safety of our staff and students is our first priority. Driving on campus is a privilege and that privilege may be revoked at any time by the principal/administration.

I authorize my child, _____, to drive to Bishop John J. Snyder High School. I understand that he/she is to act in a responsible way while operating the vehicle on school property. I also understand that failure to comply with the above requirements will result in suspension or forfeiture of driving/parking privileges.

Parent Signature

I, _____, pledge to drive responsibly while on Bishop John J. Snyder High School grounds. I will obey all posted speed limits and watch carefully for pedestrian and other vehicular traffic. I understand that failure to comply with the above requirements will result in suspension or forfeiture of driving/parking privileges.

Student Driver Signature

Please attach a copy of your driver’s license and Insurance card.

<u>For Office Use Only</u>
Student Parking Pass # _____
Payment Received: ____ cash ____ Visa/MC ____ check # ____
Date: _____