



Delta Parking Application 2021-2022

Permit # _____

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Driver's License #: _____

**Must show valid driver's license at the time of turning in application

Student Cell Phone: _____ Email _____

Parent Primary Phone: _____ Alternate #: _____

Vehicle Description: Please list any vehicle you may drive to school.

#1: **Make:** _____ **Color:** _____
Model: _____ **License plate #** _____
Year: _____

#2 **Make:** _____ **Color:** _____
Model: _____ **License plate #** _____
Year: _____

#3 **Make:** _____ **Color:** _____
Model: _____ **License plate #** _____
Year: _____

Insurance information: **Must show current insurance card

Company Name: _____

Company Phone: _____ Policy #: _____

**Please read the guidelines on the reverse side regarding parking your vehicle at Delta.

I agree to the following terms of parking:

When entering and exiting the parking lot, I will be mindful of pedestrians and other vehicles. I will use the appropriate lane to exit, not jumping the line by using the right lane, if turning left. I will not block busses from exiting in their designated lane.

Each permit issued is guaranteed 1 parking space. I will register any vehicle that I drive with the office and place the hanging permit in the windshield of whichever car I drive to school.

I understand that any vehicle not displaying a current parking permit may be towed without further notice.

****Delta High School and its respective school districts are not responsible for any vandalism or theft of any vehicle. It is the driver's responsibility to secure any valuables. Lock car doors and park in assigned parking areas ONLY. Do not block fire lanes or drive lanes.**

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge and that I will keep my insurance active for the entire school year.

Student
Signature: _____ Date: _____

Parent
Signature: _____ Date: _____