

PRINT- Last Name First Name ID# & Grade School Yr Permit #

Paradise Valley Unified School District #69



PARKING RULES & REGISTRATION FORM

1. Parking decals are purchased for a full year. The fee is based on the date of purchase; fees are prorated by quarter.
Beginning or during 1st quarter \$100 Beginning or during 3rd quarter \$50
Beginning or during 2nd quarter \$75 Beginning or during 4th quarter \$25
2. Parking permit must be displayed in front window in clear view at all times.
3. Safe and orderly use of the parking facility is a MUST.
 - a. Drive slowly....15 MPH or less.
 - b. Drive carefully...within the prescribed driving lanes.
 - c. Obey all security personnel.
 - d. Obey all driving signs.
 - e. Show courtesy to other drivers.
 - f. Pedestrians ALWAYS have the right of way.
 - g. Exit in the prescribed directions.
 - h. Neither the school nor the Paradise Valley School District are responsible for damage to or theft of, or from, any vehicle.
5. Misuse of the parking facility will **RESULT IN THE LOSS OF THE PRIVILEGE** and use of the lot (no refund).
6. Students are allowed use of the WEST parking lot only – use of faculty parking will result in disciplinary action, up to **LOSS OF PARKING PRIVILEGES**.
7. Students are **NOT** allowed to go to their cars during the school day unless they have early dismissal or special permission.
8. Possession of dangerous or illegal items in a private vehicle constitutes a violation of school board policy, as well as state statutes.
9. Student who “share” parking permits **WILL HAVE ALL PARKING PRIVILEGES REVOKED**
10. Automobiles may be searched if reasonable suspicion exists.
11. Parking passes are **NON-REFUNDABLE** per Parent-Student Handbook.
<https://pvhs.pvschools.net/families/family-student-handbook>

<u>Vehicle #1</u>	<u>Vehicle #2</u>	<u>Vehicle #3</u>
Year: _____	Year: _____	Year: _____
Make: _____	Make: _____	Make: _____
Model: _____	Model: _____	Model: _____
Color: _____	Color: _____	Color: _____
Lic. Plate #: _____	Lic. Plate #: _____	Lic. Plate #: _____

Student Driver's License Number

Insurance Company

Parent's Signature

Insurance Policy Number

I have read and will abide by all the rules regarding parking at PVHS. I am aware of the consequences of any violation.

Student Signature

Date