PARKING REGULATIONS AT GROVE CITY CHRISTIAN SCHOOL

Any student desiring to park on GCCS property ***MUST*** have a current parking permit.

Students will fill out the permit paper work and will be issued a parking tag.
Parking tags are the property of the student whom it is issued to and may not be giving to another student. Failure to abide by the parking permit regulations will result in the loss of parking privileges at GCCS.

Student parkers are permitted to **ONLY in the area designated for student parking: South of the High School wing.**

1. All vehicles must display a permit tag.
2. All vehicles are to remain locked while parked on school property.
3. Students will ***NOT*** go over 10 miles per hour, skid or squeal their tires, weave in and out of parked vehicles, litter the parking lot or fail to display their valid parking tag.
4. Students who violate regulations by leaving school without authorization or taking another student off school grounds during the school day will automatically lose their parking privileges.
5. Students are not permitted to loiter in their vehicles. Once you arrive at school, you are to enter the building immediately

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DRIVER'S PLEDGE

Driving to school is a privilege. Parents and students have read the above regulations and I agree to operate my vehicle in accordance with all traffic laws and all regulations imposed by GCCS. I further agree to place the parking tag in my vehicle. I understand that if my car is illegally parked, blocking traffic or obstructing a fire lane, it can be towed away at my expense.

Student name:_____ Date:_____

Student signature:_____

Parent Permission:
I hereby give permission as a parent/guardian of the above named student for him/her to drive to Grove City Christian School during the current school year. I accept full responsibility for their conduct and observance of local and school regulations. I understand that this form must be completed in full for my student to obtain a parking permit.

Parent's signature_____Phone_____Date:_____
Grade Level_____ Driver's License#_____
License number of vehicle_____
Color of vehicle_____Make/Model of vehicle_____
Insurance Company_____
Tag # *(to be assigned by office)*_____