

**Elizabethtown Area High School**

**Parking Permit Application 2025/2026**

Name: \_\_\_\_\_  
(Please Print)

Grade: \_\_\_\_\_

*Student parking on school property is a privilege, not a right, which is strictly conditioned upon compliance with the Student Handbook and School District policies. There is a \$25.00 non-refundable fee for parking. Checks may be made payable to Elizabethtown Area High School or you can pay online at [www.schoolpay.com](http://www.schoolpay.com).*

*School officials may search any student vehicle parked on school property, if they possess reasonable suspicion to believe a vehicle contains drugs, alcohol, weapons, tobacco products or any other item(s) which a student is prohibited from possessing on school grounds. At any time, while parked on school property, student vehicles may also be subject to searches by dogs trained to detect illegal substances. Students are required to cooperate with any searches of their vehicles including, but not limited to, allowing school officials access to a vehicle’s interior and/or trunk. Any contraband found in a student’s vehicle would be considered in the possession of the student. By signing this application you understand and agree that your vehicle(s) may be searched and that you will fully cooperate with any such search.*

**A student may lose his/her parking privilege and the \$25.00 non-refundable fee for violating the Elizabethtown Area student discipline code-of-conduct at the discretion of the High School Administration.**

**Please bring the following items for review to receive a parking permit, Drivers License, Vehicle Registration and Proof of Insurance. We do not need a copy, we only need to verify these items.**

Complete the following information for all vehicles that you will be driving to school:

Make	Model	Color	License Plate Number
1. _____	_____	_____	_____
2. _____	_____	_____	_____

I understand that parking on campus is a privilege and agree to cooperate with school administration and follow the rules set forth by the high school. I understand that my vehicle is subject to reasonable suspicion searches, including dog searchers. Parking violations will result in disciplinary consequences and/or loss of privileges.

Student Signature \_\_\_\_\_ Parent Signature \_\_\_\_\_

**Office Use:** Parking Tag # \_\_\_\_\_ Date Issued \_\_\_\_\_ Fee paid \_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ Driver’s License # \_\_\_\_\_ Auto Insurance \_\_\_\_\_ Registration Card (s) \_\_\_\_\_

