SENIOR PAINTED PARKING SPOT CONSENT FORM

1. Students **MUST** present proof that they have purchased the 2026-2027 parking pass **prior** to purchasing a senior painted parking space.
2. The fee to paint a parking spot is $40 **IN ADDITION** to the purchase of a yearlong parking pass.
3. A design sheet will need to be filled out and approved by Mrs. Rubio, Assistant Principal, before painting. Any artwork depicting items, symbols, or language that is deemed inappropriate will not be permitted. (No Profanity. No inappropriate language. No gang symbols.)
4. Painting days/times:
   Time: 7:00am – 4:00pm each day
   July 22nd July 23rd July 27th thru July 30th
5. **Paint will not be provided.**
6. When painting senior spots, it is on a first come first serve basis for spot location. Additionally, when spots are painted, all painting **MUST** stay inside parking lines and not touch parking lines as well as not touch the parking bumper.
7. Use ACRYLIC or LATEX FLAT paint only. NO OIL PAINT.
8. It is the responsibility of the students to monitor their own assigned parking space, and to report any violations to Mrs. Rubio, Assistant Principal.
9. Any student that creates a disturbance or breaks violation of contract may result in having parking spot privileges revoked and further disciplinary actions taken by administration, as well as no refund of their payment.

Last Name _____ First Name _____ Alpha Code_____

Parking Sticker Number _____ License plate # _____

Make of Vehicle_____ Model_____ Year _____ Color _____

ANY GRAFITTI, SLANDER, UNAPPROVED PAINTING, VANDALISM OR DESTRUCTION OF PROPERTY WILL RESULT IN DISCIPLINARY ACTION BY ADMINISTRATION WITHOUT EXCEPTION. STUDENT WILL BE REQUIRED TO PURCHASE PAINT AND COVER UP THE PAINTING.

I recognize, as a member of the class of 2027, that the painting of senior parking spaces is a privilege, and understand that Taylor Middle-High School administration has the right to revoke this privilege at their discretion for acts on the part of seniors negatively representing the student body and/or violations of district and school policy. I assume full responsibility for my actions and behavior and shall hold neither Taylor Middle-High School nor the School Board of Volusia County liable for an act or occurrence. I realize that it is my responsibility to adhere to the regulations regarding this senior privilege.

Signature of Student _____ Date _____

Signature of Parent/Guardian _____ Date _____

TAYLOR MIDDLE-HIGH SCHOOL
SENIOR PARKING DESIGN REQUEST

This design sheet must represent **exactly** what will be painted on your parking space if it is accepted. Please bring receipt to the painting day you attend.

Student Name: _____ Student E-mail _____

Student Phone Number: _____

Administration Approval Signature: _____

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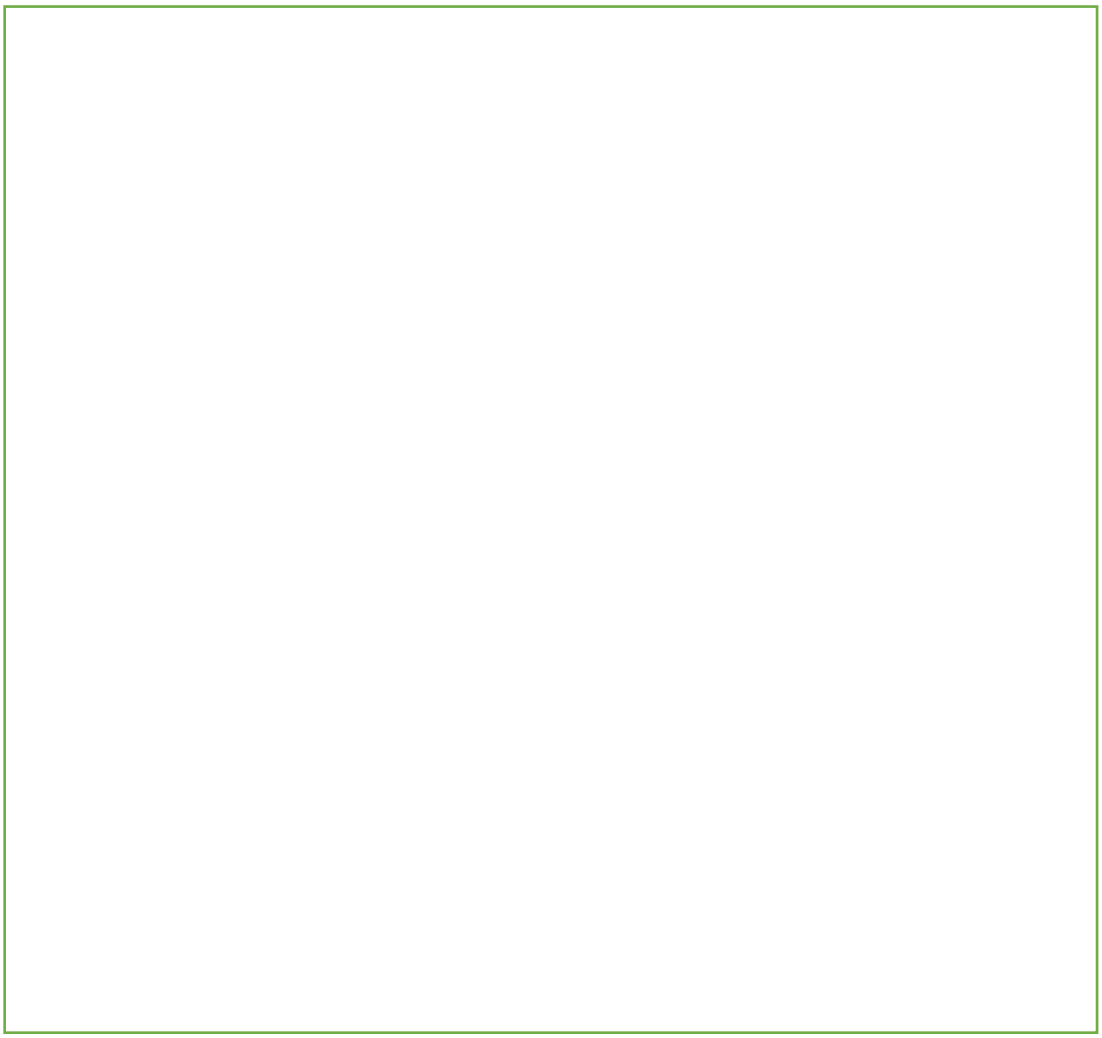

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