Integrated Arts Academy Student Parking Application
Parking Permit fee $60.00

Information on the form must be accurate, complete and legible to validate the application. The student and a parent/guardian must sign this form. Your signatures indicate that you agree to follow the parking rules and accept the consequences of these rules and regulations.

Student Driver: _____ Driver's License #: _____

Vehicle Make: _____ Color: _____ Plate #: _____

Address: _____

Parent: _____ Phone: _____

Application for Free or Reduced Student Fees

To determine my child's eligibility for a student fees scholarship, please consider the following:

My child receives free or reduced school lunch.
(By checking this box and signing below, you give permission to verify your child's lunch status)

Our family currently receives county assistance.

Our family is currently experiencing financial hardship
(Please provide a brief explanation)

Agreement

Student:
I agree to abide by the student parking rules stated in the Integrated Arts Academy Parking Rules. I understand that failure to follow these rules may result in fines, towing, and/or loss of parking privileges on the Integrated Arts Academy campus.

Driver's Signature: _____ Date: _____

Parent:
I give permission to park at Integrated Arts Academy. I have read and agree to abide by the IAA Parking Rules.

Parent/Guardian's Signature: _____ Date: _____

OFFICE USE: Paid by CASH_____ or Check_____ PERMIT # _____