

STUDENT DRIVING REGISTRATION APPLICATION		
APPLICANT INFORMATION		
Name:		
Date of birth:		
Driver's License number:		
Current address:		
City:	State:	ZIP Code:
VEHICLE INFORMATION		
<b>YOU MUST REGISTER EVERY VEHICLE THAT WILL BE PARKED ON CAMPUS</b>		
Vehicle Registered Under:		
Make:	Model:	Year:
Color:	License Plate Number:	
Make:	Model:	Year:
Color:	License Plate Number:	
Make:	Model:	Year:
Color:	License Plate Number:	
Make:	Model:	Year:
Color:	License Plate Number:	
The Following information is to be filled out by an office employee:		
How many days did you miss last school year?		
Do you owe any obligations/registration fees?		
Signature from office employee:		
SIGNATURES		
<i>By signing below, I acknowledge that I have read, understand, and agree to the terms of this agreement. I understand that Anna-Jonesboro High School has the right to refuse/revoke any parking privileges for violating any of the parking rules and regulations as set forth in the AJ Student Handbook.</i>		
Signature of applicant:		Date:
Signature of parent / guardian:		Date:

\*All spots, including gravel, are reserved parking. Students agree to park in their ASSIGNED parking spot.

\*\* If you are given a parking permit you understand that parking is at your own risk. AJCHS is NOT responsible or liable for any damages to vehicles while parked on school property.

\*\*\* You may purchase an extra tag per vehicle for the price of \$5.00.

Do Not Write – Office Use Only

Permit # \_\_\_\_\_ Grade \_\_\_\_\_ Date of Application \_\_\_\_\_  
 Fee Paid? (\$25.00/20.00) \_\_\_\_\_ Permit Approval Signature \_\_\_\_\_  
 Category I \_\_\_\_\_ Violations \_\_\_\_\_

Please have form completed prior to registration day. Student **will not** be able to pick or pay for a spot until form is filled out completely.