Teton School District No. 401

STUDENTS

Student Vehicle Parking Application

Student Name (please print)	Age	School	
Student Address	City	Zip Code	
Vehicle Make	Model	Year	
License Plate No.	Student's Driver's License No.		
Insurance Co. Name	Insuran	urance Agent's Name	
Insurance Policy No.	Name of Car Owner		

I certify, by my signature below, that the above information is true. I agree that my being able to operate and to park a vehicle on school property is a privilege conditioned on my willingness to have that vehicle subject to search by school authorities at any time the vehicle is on school property. I also understand that it is my responsibility to obey the speed limit on school grounds, to operate the car safely going to and from school and school events, to park in designated areas and to maintain legally required insurance on the vehicle. Finally, I understand that any violation of this agreement or other school rules can lead to the revocation of all parking privileges. I further understand that motor vehicles in violation of the District's Student Vehicle Parking policy may be subject to towing.

Student Signature	Date	
I, the parent/legal guardian of information supplied above and understa a vehicle by students of the District.	and and agree with the rule	hereby verify the hereby verify the es pertaining to the operation of
Parent/Guardian Signature	Date	
Policy History:		

Adopted on: March 12, 2018 Revised on: March 12, 2018 3450F