

# TRAVERSE CITY SAINT FRANCIS HIGH SCHOOL STUDENT PARKING PERMIT APPLICATION

Year: \_\_\_\_\_

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

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**\*See handbook for more details on driving.**

## VEHICLE DESCRIPTION #1 (The car you plan to drive most often)

License Plate # \_\_\_\_\_ Make & Model \_\_\_\_\_

Year \_\_\_\_\_ Color \_\_\_\_\_

## VEHICLE DESCRIPTION #2 (The car you might drive sometimes)

License Plate # \_\_\_\_\_ Make & Model \_\_\_\_\_

Year \_\_\_\_\_ Color \_\_\_\_\_

## OFFICE USE ONLY

Permit # \_\_\_\_\_

Paid \$10 \_\_\_\_\_ Completed and signed application Date \_\_\_\_\_