

**ACKERMAN HIGH SCHOOL
AUTOMOBILE REGISTRATION
2012-2013**

STUDENT'S NAME: _____

STUDENT'S ADDRESS: _____

DOES STUDENT HAVE DRIVERS LICENSE?: _____

DRIVERS LICENSE NUMBER: _____

CAR MAKE: _____ **MODEL:** _____

COLOR: _____

INSURANCE COMPANY: _____

LICENSE PLATE NUMBER: _____

MY CHILD HAS MY PERMISSION TO HAVE AN AUTOMOBILE ON CAMPUS. I AM AWARE THAT ANY MISUSE OF THE AUTOMOBILE ON CAMPUS WILL RESULT IN THE AUTOMOBILE BEING BARRED FROM CAMPUS. ONCE THE STUDENT LEAVES THE CAR IN THE MORNING, HE/SHE IS NOT TO GO BACK TO IT THE REST OF THE DAY. STUDENTS ARE NOT TO HANG AROUND CARS IN THE PARKING LOT AT ANY TIME DURING THE SCHOOL DAY.

ALL STUDENTS MUST PRESENT PROOF OF INSURANCE AND A VALID DRIVERS LICENSE PRIOR TO ISSUANCE OF PARKING PERMIT.

NEITHER ACKERMAN HIGH SCHOOL NOR CHOCTAW COUNTY SCHOOL SYSTEM IS RESPONSIBLE FOR ANY ACCIDENTS OR DAMAGE TO VEHICLES.

PARENT'S SIGNATURE

**TELEPHONE NUMBER WHERE
PARENT CAN BE REACHED**

I WOULD LIKE TO PARK IN THE _____ PARKING LOT/AREA.

PARKING PERMIT NUMBER _____

DL: _____

Insurance: _____

Paid \$25 : _____