



2017-2018 PARKING PERMIT APPLICATION

Parking Permit # _____

Parking Lot: _____

Verified Service Hours: _____

Student's Name _____ Student ID # _____

Address _____ City _____ State _____ Zip _____

Home Phone # _____ Parent's Work Phone # _____

Insurance Company _____ Policy # _____

Vehicle #1 Make _____ Model _____ Year _____

Color _____ License Plate # _____

Vehicle #2 Make _____ Model _____ Year _____

Color _____ License Plate # _____

I hereby understand the parking rules and regulations in the 2017 -2018 Student Handbook. Any violation of these rules and regulations could result in the loss of parking privileges and forfeiture of parking permit.

I further understand that parking in school parking lots is at my own risk. Bishop Gorman and the Diocese of Las Vegas are not responsible for any replacement costs due to damage or theft of property.

NOTE: FAILURE TO PLACE PARKING STICKER ON DRIVER'S SIDE OF FRONT WINDSHIELD (INSIDE) OR PARKING IN AN UNASSIGNED SPACE WILL BE CAUSE TO TOW YOUR CAR AT YOUR EXPENSE. If it is determined that your assigned parking is not being used on most school days, it will be reassigned to a student with a need for full time use.

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

Driver's License # _____ Exp. Date _____

PLEASE NOTE: Student must present a valid driver's license and proof of insurance in order to apply for a parking space. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED