

Lutheran High School

3500 West Washington St.
Springfield, IL 62711
(217) 546-6363
Fax (217) 546-6489

License Plate Number: _____

Parking Permit Number: _____

Student Name: _____

PARKING LOT REGISTRATION

Student Name _____ Parent Name _____

Make of Car _____ Model _____ Year _____

Color of Car: Top _____

Bottom _____

Occasionally, students have accidents with their cars. By keeping insurance information on file, the student has a ready resource available at the school.

Insurance Company _____

Policy Number (if applicable) _____

Agent's Name and Phone _____

The school administration reserves the right to search a car in accordance with legal guidelines.

I give permission for a representative of Lutheran High School administration to search the car driven by my student: _____ if the school administration has reasonable suspicion to do so.

Parent Signature: _____

Notes:

1. We appreciate it if parents or students notify the office if they are coming to switch cars or to get a child's car running, or something that involves them being in the parking lot dealing with a car without a Lutheran High student present. We attempt to keep an eye on the cars and get concerned if we see people we don't recognize among the cars.
2. When a change of cars occurs, please complete a new Parking Lot Registration form. The decal can be removed and placed in another vehicle.
3. The Parking Permit decal is to be displayed in any vehicle parked in a school lot during the day. The decal is valid for every year the student is enrolled at Lutheran High School. If an additional decal is needed, they can be purchased from the school office for \$5 each.
4. The decal must be displayed in the rear window on the driver's side of the vehicle.