

2018-19 DRIVING AGREEMENT

Sticker # _____

Initials _____

MAIN LOT \$100 - TENNIS COURT LOT \$50 – GRADE SCHOOL LOT \$75

(Circle which lot you are applying for)

Please complete this form and return it to the Bookkeeper along with the following items:

Valid driver's license, proof of Insurance card with valid expiration date for each vehicle listed below, cash or check payable to Hononegah Community High School and school ID.

Hononegah Community High School will attempt to accommodate as many parking permit requests as possible to senior and junior students. Parking spaces will be available on a first-come, first-served basis. Vehicles must be parked properly within a marked parking stall and not on the enclosed hash marks which are located at the beginning and the end of each row. Students selling or loaning their parking permit may have their parking permit revoked with no refund. Parking permits may not be transferred to other students or shared. Individual parking spots will not be reserved for students. All vehicles parked on school property must have a permit. If a student has lost his or her permit, contact the Bookkeeper immediately to purchase a replacement permit for \$25.

I, the undersigned, do hereby certify that I now have in force and effect a policy of automobile insurance, with limits that meet the minimum requirement of the state of Illinois as defined in the Motor Vehicle Code.

Insurance Company

Policy Number

- I further certify that all premiums due on said insurance are paid in full (or will be paid in full on or before the end of the date thereof).
- I further certify that I will keep said insurance in full force and effect while parking on school property.
- I understand and agree that the representation made by me herein are material and important to HCHS, and that misrepresentation made in this statement may subject me to disciplinary action, including loss of driving privileges.
- I certify that the information provided on this form is accurate and I will inform the Bookkeeper of any changes.

I agree to abide by the rules stated in this Driving Agreement as well as the Parent/Student Handbook and understand that violations of the school parking policies may result in fines, removal of my car from the lot at my expense and loss of driving privileges. **If for any reason, the student will not have their permit properly displayed for the day, it is their responsibility to inform the school staff member at the Visitor's Entrance. Failure to do so, will result in a parking citation that will not be voided.**

Student Name (Please Print)

Graduation Year

Parent Name (Please Print)

Student Signature

Parent Signature

	Make of Vehicle/Model	Year	Color	License Plate #
Vehicle #1				
Vehicle #2				

Registered Owner(s) Name(s): _____

Address: _____