

NASHUA HIGH SCHOOL SOUTH - PARKING PASS APPLICATION



Name:				Grade:				
(PRINT)	LAST NAME	FIRST NAME	M.I.					
Address:			Phone:					
Email:								
You must	bring the following	ng items, along with this	application, to th	e Main Office: All <u>must</u> be				
Current:	Driver's <u>License</u> , Permanent Vehicle <u>Registration</u> for each vehicle listed (no temporary 20 day plates), Proof of <u>Insurance</u> for each vehicle listed – <u>paper copy, NOT electronic</u> Payment is <u>cash or check only</u> payable to NHS South (with bus payment receipt if applicable) Full year: \$100 (\$60 with copy of bus receipt); Single semester: \$50 (\$30 w/copy of bus receipt)							
						Full year: \$100	(\$60 with copy of bus receip	t); Single semester:
ALL MUST					BE SUBMITTED W	ITH APPLICATION. <i>VEHICL</i>	ES <u>NOT LISTED</u> CA	N NOT PARK ON CAMPUS.
icense plate	es cannot be parked	uding a new vehicle purchase on campus. You may use Ste u receive your parking pass.	_					
School ID #:								
Vehicle #1: Plate#:		Make:	Model:	Color:				
Vehicle #2: Plate#:		Make:	Model:	Color:				
Wo k	aaya raad tha Studant	AGREEME : Parking Rules and Regulations		abida by thosa Bulas and				
	throughout the schoo		carerolly and agree to	ablue by these Roles and				
Student Signature:			Date:	_				
Parent/Guardian Signature:			Date:					
Parent/Guar ar insurance		ust sign the application if the s	tudent is carried on t	he Parent/Guardian				
•	-	•		nsibilities for damages to or loss nool Department is proven gross				
		SCHOOL OFFICE U	SE ONLY					
Full Year Ar	mount Paid	Receipt #	Cash	Check#				
.st Semester A	mount Paid	Receipt #						
o nd Semester A	mount Paid	Receipt #	Cash	Check#				
Bus Pass/Parking	ID Amt. Paid to Bus Office							
OSTED IN X2:	Assistant Principal A	Approval	PASS #	‡				

DO NOT PARK ON THE SCHOOL CAMPUS UNTIL YOU RECEIVE YOUR PASS YOU MAY PARK AT STELLOS STADIUM IN THE INTERIM

POSTED IN X2: _____ Assistant Principal Approval _____