

**COOPER CITY HIGH SCHOOL
2020-2021
Application for Student Parking Decal**

Decal # _____
 Parking Space # _____
 Replacement: Y N

DATE: _____
 STUDENT'S NAME: _____
 STUDENT NUMBER: _____ GRADE: _____
 ADDRESS: _____
 CITY: _____ ZIP: _____ PHONE: _____
 DRIVERS LICENSE NUMBER: _____
 MAKE OF VEHICLE: _____ MODEL: _____
 YEAR: _____ COLOR: _____ LICENSE PLATE #: _____
 VEHICLE OWNER'S NAME: _____
 UNWEIGHTED GRADE POINT AVERAGE (GPA): _____

ARE YOU INVOLVED IN EXTRACURRICULAR ACTIVITIES AT CCSH? YES NO

LIST THE SPORT(S) YOU PLAY: _____

ARE YOU A DUAL ENROLLMENT STUDENT: YES NO

Each original student parking decal is \$60.00, replacement decals are \$10.00. Every student will be assigned a parking decal that can only be used by them and the decaled vehicle.

APPLICANT'S STATEMENT

I verify that I have read and understand the rules and regulations regarding the operation of my motor vehicle on or around school property and I will always obey and abide by these rules. I understand that parking on campus is a privilege which may be denied or revoked at any time for failure to abide by the school, driving, or parking rules without a refund. I understand that my vehicle is subject to search by school officials with reasonable suspicion at any time deemed necessary and the contents of my vehicle are my responsibility and my possession.

****Student must bring a Copy of Student Driver's License, Copy of current Vehicle Registration and a Copy of Proof of current Vehicle Insurance with this application and Parking Rules signed in order to be issued a parking permit.**

The vehicle that will be used MUST be present at time of issue, for decal installation.

X _____
 Applicant's Signature

X _____
 Parent's Name Printed

X _____
 Parent's Signature

VEHICLES WITH OFFENSIVE/DEROGATORY SYMBOLS AND/OR SIGNS WILL NOT BE ALLOWED TO PARK ON CAMPUS

Do Not Write Below This Line- (School Use Only)

GPA _____ OBL _____ LIC _____ INS _____ FINAL APPROVAL: _____

CURRENT INSURANCE CARRIER: _____ EXPIRES: _____

CURRENT FLORIDA REGISTRATION: _____ EXPIRES: _____

AMOUNT PAID \$: _____ Cash/ Check RECEIPT NUMBER: _____



What to bring: copies of the following document:
 1. Current Driver's License
 2. Current Proof of Insurance
 3. Current Vehicle Registration
 4. Completed / Signed Application
 5. Signed Rules
 6. \$60 Cash or Check
 *Copy machines are not available at the school- incomplete packets will not be processed and you will lose your place in line