



**Baker County High School  
2020-2021  
Student Parking Permit Agreement**



**Price per Pass: \$20.00/Replacement: \$15.00**

**Required Documents to receive a permit:**

1. Valid driver's license
2. Valid vehicle registration
3. Valid Proof of Insurance (Current)
4. Not on the BCHS Debt List
5. Signatures of parent(s)/guardian and the student acknowledging all guidelines and enforcement/consequence policies.

**Priority of Issuance are:**

- Seniors and Juniors
- DCT/OJT
- Space availability. Once all parking permits are issued, no additional permits will be issued.

**Rules, Guidelines, and Consequences**

1. Parking permit may be **REVOKED** by administration for the following but not limited to:
  - a. Frequent tardiness and/or absences.
  - b. Multiple discipline referrals and/or suspensions.
  - c. Reckless/careless driving (speeding, etc.).
  - d. Leaving campus without permission.
  - e. Visiting vehicle during school hours.
2. Once on campus, **ALL** students **MUST EXIT** their vehicles and leave the parking lot. Violators will receive a discipline referral.
3. Students **MUST** park in their **ASSIGNED PARKING LOT**. Violators will receive a discipline referral.
4. Students **ARE NOT ALLOWED** to park on campus **WITHOUT A PARKING PERMIT**. Violators will receive the following:
  - a. Discipline Referral.
  - b. Civil Citation.
  - c. The vehicle can be towed at the owner's expense.
5. All vehicles parked on campus are subject to search under reasonable suspicion.

6. Students/parents acknowledge that they park at their own risk. BCHS is NOT responsible for any damages or thefts that occur while parked on campus.

**Student Information**

Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Home #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

**Vehicle/Owner Information**

Registered Owner: \_\_\_\_\_

Owner's Relationship to Student: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Work Phone#: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy# \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_

License Plate#: \_\_\_\_\_ Color: \_\_\_\_\_

**I have read and understand the above-mentioned conditions and consequences of the Student Parking Permit Agreement for Baker County High School.**

**I understand that parking is a privilege and not a right. Therefore, the privilege can be revoked at any time if I don't follow the guidelines mentioned in this document.**

**Student Signature:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_