

# VEHICLE REGISTRATION FORM

All student operated vehicles must be registered in the Business Office. Please read and follow all Traffic Regulations as stated in the Student Handbook.

Name of Student

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Registered Owner(s) of Vehicle

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Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

Color \_\_\_\_\_

License Plate: State \_\_\_\_\_ Number \_\_\_\_\_

Insurance Company

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Policy Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Other Student-driven Vehicles (if applicable)

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Do you have a valid driver's license? YES NO

Do you now have or do you intend to have a vehicle at SPLHS? YES NO

Is at least the minimum insurance coverage required by the state in which the vehicle is registered in place at this time? YES NO

I hereby acknowledge that I will follow and obey all traffic rules and policies of Saint Paul Lutheran High School. I understand that I am responsible for the above vehicle regardless of who the driver is or where it is parked.

I certify all of the above information to be true and correct.

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Student Signature

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Date

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Parent Signature

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Date

**PLEASE FURNISH A COPY OF THE CURRENT INSURANCE CARD AND STUDENT DRIVER LICENSE.**