

**RAVENNA HIGH SCHOOL
PARKING PERMIT APPLICATION**

Parking Permit # _____

Name of Licensed Driver _____ Grade _____

Vehicle Make _____ Vehicle Model _____ Year _____

Vehicle Color(s) _____ License Plate # _____

I understand that driving to school is a privilege, not a right. I will abide by all traffic rules as listed below and understand that failure to abide will result in the loss of my driving privileges.

- 1. I will honor the parking lot driving speed of 5 MPH and ALWAYS yield to pedestrians.**
- 2. The parking lot is open between the hours of 6:30 am and 11:00 pm. If you are on an overnight, school related trip and want to keep your vehicle in the lot overnight, please get advanced permission from the office.**
- 3. Please respect all vehicles in the lot and drive cautiously especially after school is out for the day.**
- 4. Please park between the yellow lines and do not angle your vehicle.**
- 5. Reckless driving will not be tolerated and will result in discipline which could include suspension of driving privileges and other school related discipline.**
- 6. The School reserves the right to search your vehicle if reasonable suspicion exists that illegal or inappropriate items are inside your car.**
- 7. The school is not responsible for lost or stolen items in vehicles or in the parking lot.**

Signature of Student _____ Date _____

Signature of Parent _____ Date _____