2023-2024 FAIRBORN HIGH SCHOOL



Parking Space Application

Copy of Driver's License and Proof of Insurance must be attached

| Parking N | umber | _ | |
|---------------------------------|-------------------|------------------------------------|---------------------------------|
| Student Grade | | | _Grade |
| Date of Birth Driver's License# | | | |
| Address | · | | |
| Students Phone # Parents phone# | | | |
| Parents Name | | | |
| | | | |
| Vehicle | Information (S | Students are only allowed to | register two vehicles per pass) |
| Year | Color | Make/Model | Plate# |
| Year | Color | Make/Model | Plate# |
| I underst | and that parking | g on Fairborn High School prope | rty is a Privilege |
| That can | be revoked for a | nny misconduct including any ba | d driving habits (ex. |
| Speeding | , recklessness, e | tc.) On school property as well a | as adjacent streets. |
| *Please n purchase | | s purchasing a parking pass will i | not be provided a refund once |
| Date | | | |
| Parent S | Signature | | |
| Student | Signature | | |