CORONA UNITED METHODIST CHURCH PARKING LOT

2880 CALIFORNIA AVENUE, CORONA, CA 92881 (951) 737-5225   coronaumc@aol.com

VEHICLE REGISTATION AND RULES FOR SANTIAGO HIGH SCHOOL STUDENTS

_____   _____   _____   _____

Last Name   First Name   Grade   License Plate No.

YEAR AND MAKE OF CAR:_____   SCHOOL:_____

MODEL:_____   SCHOOL YEAR:_____

COLOR:_____   CA DRIVER'S LIC. NO.:_____

Regulations:

1. **PLAQUE MUST BE HUNG FROM REARVIEW MIRROR.**
2. **NO PARKING IS ALLOWED IN THE BACK LOT OFF CHASE AVENUE.**
3. No vehicle will be allowed in the parking lot without plaque.
4. CAR IDENTIFICATION PLAQUE COST: $40 per semester or $75 for school year for regular school days 7am to 5:30 p.m. /no special event or graduation parking.   CASH (exact change please) OR CHECK ONLY! NO CREDIT CARDS ACCEPTED.
     NO REFUNDS.
5. Students are to use parking spaces in the marked areas only. **Do not park in spaces marked RESERVED.**
6. The speed limit in the parking lot is five (5) miles per hour.
7. One car is permitted in each parking stall.
8. Students are not allowed to share a parking permit. Students may not drive each other's vehicles.
9. Students are not to loiter or sit in vehicles in the parking area at any time.
10. Students are not to tamper with any vehicle.
11. Students are not permitted in the parking lot during class time or between classes.
12. Must show current **PROOF OF INSURANCE, VEHICLE REGISTRATION AND DRIVER'S LICENSE** to receive parking plaque. **Must provide an emergency daytime phone contact number.**
13. **PLEASE DO NOT LITER IN THE PARKING LOT!**

The laws provided in the California Vehicle Code are in effect. Any violation of these laws will be handled by law enforcement officers. Students and parents agree to hold the Corona United Methodist Church free and harmless from any loss, damage, liability, cost or expenses that may arise during or be caused in any way by use of the parking lot.

I have read the above information and agree to abide by these rules.

_____   _____
STUDENT SIGNATURE   PARENT SIGNATURE

_____   _____   _____

TELEPHONE   ADDRESS   DATE _____

EMAIL :_____