

Name: _____

Please PRINT legibly

- Miller or PALs
- On campus all day



SLHS Parking Agreement

Student, please **initial** all statements below after reading.

____ I have read and understand all vehicle regulations found in the Katy Independent School District's Parent-Student Handbook and the Discipline Management Plan and Student Code of Conduct. I agree to follow all present and future regulations.

____ I understand that I may **NOT** go to my car during the school day without a security escort. If I am found in the lot without permission, I understand that my vehicle may be subject to a search and there may be discipline consequences.

____ I understand that if I choose to leave campus during the school day without following proper attendance procedures, my vehicle and my person are subject to a search, and there may be discipline consequences.

____ I understand that my parking permit could be revoked for disciplinary action related or unrelated to parking/driving violations. If my permit is revoked, I will not get a refund of parking permit fees.

____ I understand that if I purchase a general permit, I may only park in **unnumbered** spaces in the lot for which I purchased a permit. If I purchase a reserved permit, I must only park in my reserved space. I understand I may receive a violation for parking in an unauthorized area.

____ I understand that if I need to temporarily drive a different vehicle other than the one I registered, I must come in to the parking office and get a temporary tag. I understand that failure to register my vehicle for a temporary permit may result in a violation and/or discipline consequence.

____ I understand that receiving more than one violation per academic year will result in a parking fine of \$25 per violation. Unpaid fines will result in a hold on your exemptions or diploma.

____ I understand that if I get a new vehicle, I must update my information in the parking office. If I do not return the sticker from my previous vehicle, there is a \$10 sticker replacement fee. (A returned sticker will be traded for a new sticker at no charge.)

____ I understand that KISD assumes no liability for student parking. Students park at their own risk with regard to accidental damage to vehicles.

____ I understand that if I am in classes at Miller or in the PALs program, I will be required to park in one of the front lots.

Parent/Guardian Signature	Date
Student Signature	Date

-----For office use only-----

RESERVED	Pay N Go payment information:
Sticker: _____ Space: _____	
GENERAL	Amount: _____
Sticker: _____ Lot: _____	Date: _____