ST	JDENT VEHICLE R	REGISTRATION F	-ORM		
R Banner ID)	Date		Permit Number	
APPLICANT	"S NAME:				
LOCAL ADD	Last Name DRESS:		First Name	Middle Name	_
Street #	Street Name	Apt. #	City	State	
Zip Code	Area Code	Phone Number	Driver's License Number	State	<u>—</u>
HOME ADDI	RESS:				
Street # VEHICLE IN	Street Name FORMATION: STUD	City ENTS MAY ONLY	State REGISTER ONE VEHICI	Zip Code LE PER PERMIT	
VEHICLE IN State Yr.	FORMATION: STUD	ENTS MAY ONLY Make Model		LE PER PERMIT	
VEHICLE IN State Yr.	FORMATION: STUD	ENTS MAY ONLY Make Model	REGISTER ONE VEHIC	LE PER PERMIT Color Model Year	Hlel Year030
State Yr. REGISTERE	FORMATION: STUD	ENTS MAY ONLY Make Model	REGISTER ONE VEHIC	LE PER PERMIT	Hlel Year030
State Yr. REGISTERE	FORMATION: STUD	ENTS MAY ONLY Make Model CLE: Cce9	REGISTER ONE VEHICI Type (2dr. 4dr. Pickup)	LE PER PERMIT Color Model Year	Hlel Year030
State Yr. REGISTERE ICATION	License Plate # ED OWNER OF VEHIC Biomedical Sciences	Make Model CLE: Cce Card	Type (2dr. 4dr. Pickup) Annual Permit Amount \$ www.4.850 Td[Td()TEMC)30 Number	LE PER PERMIT Color Model Year	
State Yr. REGISTERE	License Plate # ED OWNER OF VEHIC Biomedical Sciences	Make Model CLE: Cce Card	Type (2dr. 4dr. Pickup) Annual Permit Amount \$ www.4.850 Td[Td()TEMC)30 Number	LE PER PERMIT Color Model Year 0 () F9.011 Tc 0.006 T\$	HIel Year030

Student Acknowledgement

By accepting this decal, I acknowledge receipt of the "Traffic and Parking Regulations." I understand that my
parkfugnprivileges may be cancelled upon the termination of enrollment and that any refund request ff8q30.7 (nu597 (f)4 Tc 0.004.7 (f)57 (h)30.8(e)10 Tc 0 Tw50.2180