



TRINITY ACADEMY

Innovative Classical Learning

Vehicle Registration Form

Driver's Name: _____ N.C. Driver's License # _____

Date of Birth: _____

Make	Model	Color	Rag

Students driving to and from school and parking on campus agree to the following:

1. The student driver will drive to and from school in one of the above-listed, registered vehicles.
2. The student driver will park their vehicle on campus for the duration of the day's school hours.
3. The student driver will park in available spots in the gravel lot, always pulling into the closest space.
4. The student driver will not access the vehicle during school hours without faculty permission.
5. The student driver will not keep illegal, dangerous or Trinity-inappropriate items in the vehicle. These include, but are not limited to alcoholic beverages, drugs, tobacco products, guns or knives.
6. The student driver will observe all NC General Statutes and all Trinity driving rules including stop and yield signs, directional lanes and lines. In accordance with NC General Statutes those under 18 are not to use a device (i.e. cell phones, tablets, etc.) while the car is in motion.
7. The student driver will remain conscious of their presence on a family-oriented campus with young children and grandparents. Driving habits should demonstrate extreme caution.
8. Vehicles should not contain stickers, logos, symbols or messages inconsistent with a Christ-like culture.
9. The student driver should not play music audible outside of the vehicle while on campus.

Permission for student drivers to transport or be transported by other student drivers is indicated below.

Permission to transport	Permission to be transported by

To the student: I have read and accept the conditions described above. In addition, I acknowledge that vehicle registration and the driving/parking opportunities are a privilege, not a right. Failure to abide by the conditions above or other school rules and regulations may forfeit my registration a driving/parking privileges.

Driver's Printed Name Driver's Signature Date

To the Parent: I have read and accept the conditions described above. In addition, I will not hold Trinity Academy or its faculty, staff or employees liable for any damages or injuries sustained by my child while operating one of the vehicles registered above during transportation to, from or on campus.

Parent's Printed Name Parent's Signature Date