

STUDENT VEHICLE REGISTRATION & PARKING AGREEMENT

Students must have school approval before driving or parking a vehicle on Four Rivers property. Please submit this completed form, along with copies of the student's driver's license, current vehicle registration, and proof of insurance, to the Front Office.

Student Information

Legal First Name: _____ Legal Last Name: _____

Grade: _____

Vehicle Information

Year: _____ Make: _____ Model: _____

Color: _____ License Plate: _____

Driver's License Copy: ☐ Attached

Vehicle Registration Copy: ☐ Attached

Proof of Insurance: ☐ Attached

I certify that the vehicle listed above is currently registered and insured and that my student is legally authorized to drive the vehicle.

Parent/Guardian Permission

I give permission for my student to drive the vehicle identified above to and from Four Rivers Charter Public School. I understand that parking and driving on school property is a privilege and that my student must follow Massachusetts motor vehicle laws and Four Rivers rules.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Student Driver Agreement

I understand and agree that:

- I may not drive or park on Four Rivers property until my vehicle has been approved by the school.
- I must follow all Massachusetts motor vehicle laws and Four Rivers driving and parking rules.
- I may park only in designated student parking areas.
- I will drive at a safe speed and will not exceed **10 mph** on school property.
- I will yield to pedestrians and school buses and will not pass another moving vehicle on school property.
- Only the student registered with the school may drive the vehicle on school property.
- I will not return to or use my vehicle during the school day unless I have prior approval for a school-related activity.
- I will not use my vehicle to transport other students during the school day unless specifically authorized by the school.
- I understand that Four Rivers is not responsible for damage to or theft from vehicles parked on school property.
- I understand that Four Rivers may suspend or revoke my parking privileges if I violate school rules or drive in a manner that creates a safety concern.

Student Signature: _____ **Date:** _____

School Approval

Approved By: _____

Signature: _____ **Date:** _____

Approval Effective: _____ **Through:** _____