Parking Regulations – 2017-18 School Year
New London High School

1. All vehicles must have permits to park in any of the high school parking lots. This includes students and staff. Visitors must register at the main office. Permits can be purchased in the main office at the high school or paid for online at http://www.newlondon.k12.wi.us . **This completed form needs to be returned to the office to obtain the parking permit.**

Permit Fee = $50.00 per year
Replacement fee for permit that is lost or stolen = $10.00

If you purchase a permit for 1st semester only ($25.00), you will automatically be billed for 2nd semester parking. If 2nd semester is not paid for by January 19, 2018, you will be subject to a parking violation.

2. Permits should be **displayed on the rear view mirror**. If bringing a different vehicle, switch the tag to the new vehicle and report the vehicle information to the main office so a temporary permit form can be completed.

3. Parking lots will be monitored daily.

4. Inappropriate activity with your vehicle may result in suspension of parking privileges.

5. **Violation of vehicle without permits**:
   a. Warnings of consequences of not having a permit will be given on school announcements, web site and by completion of this document.
   b. First (subsequent) violations - $15.00 parking ticket (possible vehicle registration suspension).

6. All City of New London Parking Lot Ordinances under 7.11 also apply.

(Please complete and detach the Application for Student Parking Permit below. Make check/money order payable to New London High School or make payment through eFunds online. – **If paying online, please present the bottom portion of this form to receive your permit.**

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Payment Information (Office Use Only) **Permit No**:________________

Full Year:_______________________ 1st Sem Only______________ 2nd Sem Only___________________

Date Paid ______________________________ Prorated Year: _____________________________

Check #_______________ Cash ___________ Online_____________

Application for Student Parking Permit
(Please Print)

Last Name:______________________________**First Name:**_____________________ **Middle Initial:**_____

Address:____

Street **City** **Zip**

Telephone No. (   )____________ **Age:**_____ **Birthdate:**____________________________

Vehicle Registered to:_______________________________ **Relationship to Applicant:**_________________

(Name)

Vehicle Year:_______ **Make:**________________________ **Model:**_____________________________

Color:______________ **Vehicle License Plate Number:**______________________

All information is required before a parking permit is issued. – Please print.