

College Park Baptist Church
1601 Walker Avenue, Greensboro, NC 27403

Parking Permit Application

Permit #

S-

FEES: SEMESTER PERMIT - \$150.00

Name _____

Current Address _____ Email: _____

Work Address _____ Email: _____

(If Student, Permanent Address)

(cell) _____

Telephone # (work) _____ Telephone # (home) _____

Vehicle # 1

Vehicle # 2

Make _____

Model _____

Year _____

License Plate _____

NCDL # _____

How did you hear about parking at College Park? _____

If student, graduation: month _____ year _____

I have read, understand, and agree to abide by the attached parking regulations.

Signed _____ Date _____

For office use only, do not write below:

Type: ρ Annual ρ Fall ρ Spring ρ Summer

Effective Date _____

Fee Received _____

Expiration Date _____

Check # _____

Issued By _____

Date _____