

CENTRAL BUCKS HIGH SCHOOL WEST

Student Automobile Registration Application 2025-2026

Office Use Only

Permit #1 _____

Permit #2 _____

Permit #3 _____

Name: _____ Grade: _____ Homeroom: _____

Address: _____ Date of Birth: _____

_____ Phone #: _____

Driver's License #: _____

Application is hereby made for registration of the following automobile(s) to be operated and parked by me in one of the designated student areas of Central Bucks High School West. **I understand that C. B. West and the Central Bucks School District are not liable for theft from or damage to the vehicle while it is parked on school property.**

***Proof of ownership - A copy of a valid registration must be included for each vehicle that you are registering at the time of application. Permits are not transferable to other vehicles.**

_____		_____	
Make and Model - Most often driven		Make and Model of car #2	
_____		_____	
Year of Mfg.	Color	Year of Mfg.	Color
_____		_____	
License Plate No.	State	License Plate No.	State
_____		_____	
Owner's Name & Phone No.		Owner's Name & Phone No.	

Applicant's Statement: 1) The information on this application is true and accurate. 2) I have read and understand the driving and parking rules and I will comply with them. 3) I have read and understand the consequences that will result from violating the driving and parking rules. 4) **I understand that my driving privilege could be revoked should I fail to pay a parking violation within three school days. I will also face additional disciplinary action.**

Signature of Applicant _____

(Date) _____

Electronic Signature Not Accepted

Parent/Guardian Statement: 1) I have reviewed my child's application for driving and parking on the property of Central Bucks High School West, and the information provided is true and accurate. 2) I have read the driving and parking rules and the consequences of violating those rules and accept and approve of C.B. West's responsibility to enforce them. 3) I understand that by signing this application I am giving my child permission to drive to and from school.

Signature of Parent/Guardian _____

(Date) _____

Electronic Signature Not Accepted