

<b>2010 / 2011</b>		<b>GRAYSON COUNTY COLLEGE VEHICLE REGISTRATION FORM</b>				<b>Permit #: (Leave Blank)</b>	
Last Name:			First Name:		Middle:	Student ID #:	
<u><b>(STUDENT)</b></u> <input type="checkbox"/> GCC Student <input type="checkbox"/> SOSU Student <input type="checkbox"/> GED / ESL <input type="checkbox"/> Handicap Parking Required			<u><b>(FACULTY &amp; STAFF ONLY)</b></u> <input type="checkbox"/> Administrator (Title: _____ ) <input type="checkbox"/> Faculty (Division: _____ ) <input type="checkbox"/> Staff (Employee Assignment: _____ ) <input type="checkbox"/> Other (Explain: _____ )				
Driver's License #:		State:	Make of Car:	Model:	Year:	Color:	
License Plate #:		State:	Telephone #:				
Home Address:				City, State, Zip			
<b>My Signature below indicates that I have received a copy of the college traffic/parking regulations and agreement to comply while operating a vehicle on campus.</b>							
Signature:						Date:	
For Office Use Only: Revised July 20, 2009		Paid: _____ Not Paid: _____ Additional Parking Permit: _____ Check for Payment: _____					

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