

JEFFERSON COMMUNITY COLLEGE
Student Vehicle Registration

Name:

(Last) (First) (Middle Initial)

SS# _____

List All Vehicles:

(Make/Model) (Registered Owner) (Plate Number)

(Make/Model) (Registered Owner) (Plate Number)

(Make/Model) (Registered Owner) (Plate Number)

(Make/Model) (Registered Owner) (Plate Number)

I hereby acknowledge I will:

1. Park in the appropriate parking area.
2. Obey all parking and traffic regulations
3. Promptly pay all fines assessed for violations of these regulations

I do, hereby release Jefferson Community College and the County of Jefferson, and the officials thereof, from any and all claims for damages sustained by me, of any kind, either personally or to the automobile driven by me, from any cause whatsoever while said car shall be parked on Jefferson Community College property, except a claim arising from the operation of a college-owned vehicle, and I do agree to hold Jefferson Community College harmless from claims for damage made by persons brought onto said college property as passengers in my car, and do hereby agree that a violation of any conditions of these regulations shall be valid for cancelling my parking privileges.

Signed

Date