

Raymond High School

VEHICLE PERMISSION FORM

_____ has permission to bring the
Student's Full Name

following vehicle** _____ / _____ / _____ Plate# _____
Year Make Color

on _____ / _____ / _____
Day of Week Date Month Year

for _____ as part of the instructional program
Purpose

in _____
Subject Area

APPROVED: _____ Teacher's Signature

_____ Students Signature

_____ Parent/Guardian Signature

_____ School Administrator

**Please note that the above vehicle must have liability insurance of at least 25/50/25. You will be asked to provide Certificate of Insurance on the above listed vehicle.

WHITE-In Vehicle

YELLOW-Office

PINK-Parent/Guardian