**WILLIAM & MARY PARKING REGISTRATION FORM (EMERITUS)**

**Office of Parking Services**

**201 Ukrop Way**

**P. O. Box 8795**

**Williamsburg, Virginia 23187-8795**

**757-221-4764 - parked@wm.edu**

**The information on this form is both true and accurate. I agree to notify Parking Services if and when any information changes. I have read and agree to abide by the Rules & Regulations.**

**The faculty/staff permit allows parking in faculty/staff areas only, except any space marked faculty/staff ‘at all times’ or ‘reserved’. You may not park in any space marked reserved at all times.**

|  |  |  |
| --- | --- | --- |
| **LAST NAME** |  | **Office Use****Affix Permit** **Sticker(s)****Here** |
| **FIRST NAME** |  |
| **DRIVER’S LICENSE #**  |  |
| **HOME ADDRESS** |  |
| **CITY, STATE, ZIP** |  |
| **TELEPHONE #** |  |
| **EMAIL ADDRESS** |  |

**ADA/Accessibility (If Applicable)**

|  |  |
| --- | --- |
| **STATE ADA PLACARD #** |  |
| **W&M TEMP ADA PERMIT #** |  |
| **ISSUE DATE** |  |
| **EXPIRATION DATE** |  |

**Method of Payment for the $12.00 fee**

|  |  |
| --- | --- |
|  | **VISA / MC / AMEX / DISC (< Circle One)** |
|  | **CHECK** | **CHECK #** |  |
|  | **CASH** |

*PLEASE COMPLETE YOUR VEHICLE INFORMATION. ANY VEHICLE DISPLAYING A HANGTAG MUST BE REGISTERED. ONLY ONE VEHICLE MAY BE REGISTERED TO AN ADHESIVE DECAL.*

|  |  |
| --- | --- |
| **VEHICLE #1** | **VEHICLE #2** |
| **LICENSE PLATE #**  |  | **LICENSE PLATE #** |  |
| **STATE** |  | **STATE** |  |
| **VEHICLE MAKE/MODEL** |  | **VEHICLE MAKE/MODEL** |  |
| **COLOR** |  | **COLOR** |  |
| **YEAR** |  | **YEAR** |  |
| **BODY STYLE (Circle One Below)** | **BODY STYLE (Circle One Below)** |
| **2 Door****(Coupe)** | **Convert** | **4 Door****(Sedan)** | **Hatchback** | **Station Wagon** | **2 Door****(Coupe)** | **Convert** | **4 Door****(Sedan)** | **Hatchback** | **Station Wagon** |
| **SUV or Crossover** | **Van** | **Truck** | **Motorcycle or Moped** | **SUV or Crossover** | **Van** | **Truck** | **Motorcycle or Moped**  |

**SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_**\_\_