



Recreation Center Parking Registration Form

Name: _____

UNG ID # _____

Email: _____

VEHICLES:

Vehicle 1

Year: _____ Make: _____ Model: _____ Tag# _____

Color: _____ State: _____

Vehicle 2

Year: _____ Make: _____ Model: _____ Tag# _____

Color: _____ State: _____

Vehicle 3

Year: _____ Make: _____ Model: _____ Tag# _____

Color: _____ State: _____

AUTHORIZATION STATEMENT

- ☐ By applying for this permit, I certify that the information provided is true.
- ☐ I agree to notify Parking & Transportation Services of any changes in this permit information and to comply with the UNG Parking Rules and Regulations which have been made available to me online at and at the Parking & Transportation Services Office.
- ☐ I also agree to be responsible for any parking violations issued to vehicles with this permit.

Signature

Date