

		Dec	al #:
		Enre	ollment Year:
		(FO	R OFFICE USE ONLY)
		Cell phone#	
(PLEASE PRINT)			
Student ID #:			
License Plate #:	Veh	nicle Color:	
Vehicle Year:	Vehicle Make:	Vehicle Mod	del:
Permanent Address: _			
City:	State:	Zip:	
· ·	false statement on this applicate have received a copy of the Lamo	•	penalty fee and/or disciplinary Parking Regulations Pamphlet.
Signature:	Date:		
For any questions co	ontact Parking and ID Depart	ment @ ParkingandID@La	amarpa.edu (409) 984-6161

You **MUST** have your <u>Parking Fee & Tuition PAID</u> **AND** your <u>license plate number</u>

in order to receive your parking decal.