



# COLUMBUS STATE PARKING REGISTRATION FORM

Name \_\_\_\_\_ 909 \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Student Type      Commuter      Resident

Color \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

State \_\_\_\_\_ License Plate \_\_\_\_\_

I hereby agree to the rules and regulations as listed in the Parking Code.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date