



Student Driver Form

Students Name: _____ Date of Birth: _____

Driver's License Number: _____ State: _____

Vehicle: Make: _____ Model: _____ Color: _____

Year: _____ License Plate Number: _____

- I understand that driving to and from school is a privilege and if I abuse the privilege, I may lose it.
- I understand that I am to drive slowly (under 20 MPH) when entering and leaving the LCA parking lot.
- I understand that I am not to be peeling out, driving on the grass, doing donuts, etc.
- I understand that I am to arrive on time and leave at the proper time.
- I understand that I am not allowed to leave campus for any reason without having written communication from a parent and obtaining permission from the office before signing out.
- I understand that I cannot take someone with me in my car that is not a regular rider without permission from the parents and the office.
- I understand that I cannot leave the school building and go to my car without permission.
- I understand that if I arrive late or I am coming late (after Homeroom) from Dual Enrollment, I must sign in at the office.
- I understand that I am responsible for any damage to my car or any damage that I cause to anyone else's property and will not hold Legacy Christian Academy responsible.
- I understand that this form must be submitted before the first day of school or before the first day that I start driving to school.
- I agree to the expectations listed above and agree to follow them.

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Parent's Signature _____ Date: _____



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