Card #	Parking dates:
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We know children.

All Members of the Children's Hospital & Medical Center Staff and associated CHMC groups are required to register their vehicle with the hospital Security Department.

The Information below is required to obtain the permit. The form must be filled out COMPLETELY.

Please return this form to the Office of Education to obtain the parking permit.

Children's Hospital & Medical Center Vehicle Registration Form						
Name: (Last, First and MI)						
rume: (East, First and Im)						
Department Name:						
Student Type:						
урст						
Vehicle Information						
Make of Vehicle:						
Model of Vehicle:						
Year:						
Color:						
License Plate #:						
State of Issuance:						
For Security Only						
Decal Color:						
Decal #:						
Assigned Parking Location:	CHS	Meth.	Durham	Other		
Operations Director Approval for On-Campus Parking						
Director Name (Please Print):						
Signature (Director):						
Date:						