

# **NYA STUDENT VEHICLE REGISTRATION**

STUDENT \_\_\_\_\_ GRADE \_\_\_\_\_

CAR MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_

COLOR \_\_\_\_\_ PLATE# \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

PHONE \_\_\_\_\_

Please return this form to Mrs. Johnson to register each vehicle that will be driven to school. All vehicles must be registered by Monday, September 14.