LEHIGH
*Transportation & Parking Services*

106 Johnson Hall, 36 University Drive
Bethlehem, PA 18015-3043
610-758-PARK

# GRADUATE STUDENT MOTOR VEHICLE REGISTRATION
(Including RA/GA/TA)

ID NUMBER: ___ - ___ - ____ (Lehigh Identification Number)

LAST NAME:

FIRST NAME: CLASS:

LOCAL ADDRESS/DEPT: USC BOX #:

CITY: STATE: ZIP:

CAMPUS PHONE: ___ - ___ - ____ CELL PHONE: ___ - ___ - ____

**GRADUATE POSITION (If Applicable):**

☐ RESEARCH ASSISTANT ☐ GRADUATE ASSISTANT ☐ TEACHING ASSISTANT DEPARTMENT NAME: _____

**VEHICLE REGISTRATION INFORMATION (Please attach a copy of your state vehicle registration)**

LICENSE PLATE: MAKE:

STATE: VEHICLE YEAR: COLOR:

**IF OWNER IS OTHER THAN REGISTRANT, PRINT NAME AND ADDRESS OF OWNER BELOW.**

**WARNING:** No student may register any vehicle not owned by and registered to him/her or his/her family. A student may not register another student's vehicle. Violations are considered serious offenses resulting in significant fines ($100 or more per incident) and referral to the Dean of Student's Office for disciplinary action.

I certify that all information give by me is true and correct and that the above requested vehicle registration conforms to the Motor Vehicle Regulations issued by Lehigh University, as available at www.lehigh.edu/~inpark/parking_regulations.html.

_____
Signature Date

**PARKING FEE**

☐ $50 Fee enclosed – Grad (Parking **ONLY**) after 4pm Monday thru Friday or all day Saturday or off-campus residence

☐ $115 Fee enclosed – RA/GA/TA NOT residing at Saucon Village

☐ $200 Fee enclosed (on campus residence, Saucon Village, including RA/GA/TA residing at Saucon Village

Please make check payable to "Lehigh University"