



**Victory Ministries  
Student/Staff/Resident Car Registration**

**Car you will be driving:**

Car License #:

Color:

Make:

Model:

Year:

- Permit Issued # \_\_\_\_\_
- Student
- Staff
- Resident

*Name of driver:*

*Date of birth:*

*Driver's license#:*

*Name of company car is insured with:*

*Policy # as listed on State of California Evidence Insurance Certificate:*

*Circle days of the week you will be driving:*

Sun   M   T   W   TH   F   Sat

If driving schedule follows a pattern other than certain specific days each week, please describe that pattern: \_\_\_\_\_

Signature: \_\_\_\_\_

Parent's Signature (If Minor): \_\_\_\_\_

**\*\*Please have driver's license and insurance card available when returning this form. A copy of these documents will be kept on file. Permit needs to be displayed in lower driver's side windshield\*\***

