## WCU Catholic Campus Ministry



## **PARKING PERMIT REGISTRATION & LIABILITY WAIVER**

Revised June 2025

NAME:		
I am paying for (circle one):	FALL   SPRING   FULL YEAR	
CELL PHONE:	EMAIL:	
MAKE/MODEL:	COLOR:	

## LICENSE PLATE NUMBER:

Parking permit rates are \$150 per semester or \$300 per year. Payment may be made by cash or personal check made payable to "Catholic Campus Ministry."

By signing below I acknowledge and agree to the following:

- I am required to visibly display my permit from my rear view mirror any time my vehicle is parked in the CCM lot.
- I agree to park within a single marked parking space in the CCM lot and understand that if I park across multiple spaces or in any way that blocks another vehicle that my vehicle will be subject to towing.
- I understand that my permit provides the privilege of parking in the CCM lot and does not guarantee a space at all times.
- I understand that a permit is required to park in the CCM lot from Monday-Friday from 8:00 AM until 5:00 PM.
- During home football games and other special events, CCM may charge a separate parking fee as a fundraiser.
- I understand that my parking permit is for me and my vehicle only and is not transferable. If I acquire a new vehicle during the course of the semester I will notify CCM of the change. If I lose my permit I will be charged a \$10 replacement fee.
- I understand that Catholic Campus Ministry and the Diocese of Charlotte are not responsible for the safety of my vehicle and absolve them from any liability for damages incurred to my vehicle while parked in the CCM lot.
- I understand that no refunds will be provided if I leave WCU for any reason during the semester.

## SIGNATURE:\_\_\_\_\_

If mailing this form with payment, please enclose your check and mail to:

> WCU Catholic Campus Ministry PO Box 2766 Cullowhee NC 28723

PLEASE MAIL MY PARKING PERMIT TO:		
Address:		
City:	State:	
Zip:		

DATE :\_\_\_\_\_

Permit Number: Payment received date: