High Point Christian Academy

Student Driver Vehicle Registration

| Student Name: | | |
|--------------------------|-----------|--|
| Driver's License Number: | | |
| Vehicle Information: | | |
| Vehicle Owner's Name: | Phone #: | |
| Insurance Company: | Policy #: | |
| Make | Year | |
| Model | Color | |
| License Plate #: | | |
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| For office use only | | |
| Log in notebook | | |
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