

**Ohio High School
District 505
Ohio, Illinois**

Motor Vehicle Registration

Date: _____

Vehicle to be driven to school:

Color: _____

Make/Model: _____

Year: _____

License Number: _____

**Describe any other vehicle you may be driving in the same way.
Keep this registration form current.**

**We have read the conditions for the driving privileges and are
willing to abide by them.**

Parent signature

Student signature