



Wilson School District No. 7

REGISTRATION FORM FOR TRAVEL REDUCTION PLAN (TRP) PROGRAM

I _____ use an alternate mode of transportation to work.

I would like to use the carpool parking space designated for Wilson Elementary School (4-8).

I would like to use the carpool parking space designated for Wilson Primary School (K-3).

I would like to use the carpool parking space designated for the District Office.

I do not need to use a designated carpool space.

Individuals I carpool/vanpool with: _____

License Plate Number: _____

I ride the light rail/bus/bike/walk to work: YES NO

PLEASE NOTE: Carpool parking spaces will be assigned on an alternate basis.

Signature

Date