

## VEHICLE REGISTRATION FORM FOR PENROSE AND ST. FRANCIS HOSPITAL

STUDENT NAME:	
DEPT. ASSIGNED:	
VEHICLE #1 LICENSE PLATE STATE & NUMBER:	
VEHICLE #2 LICENSE PLATE STATE & NUMBER:	
VEHICLE #3 LICENSE PLATE STATE & NUMBER:	
<input type="radio"/> I currently do not drive / own a vehicle	

**Please note:**

- **It is the vehicle operator's responsibility to ensure the issued parking tag is displayed on the vehicle's rear-view mirror**
- **Tag number should be facing towards the front of the windshield.**
- **Any changes to vehicle information and or associates department must be reported to the Electronic Security Specialists at Penrose Hospital or St. Francis Medical Center.**
- **You may e-mail the completed registration form as well as any updates to [PSFbadges@centura.org](mailto:PSFbadges@centura.org).**