

Official Use Only:

Hangtag #:

Liberty University Student Carpool Application Form

Carpool Rules

- Participants unable or unwilling to abide by the LU Honor Code may not participate in the program.
- Participants must be Liberty University resident program commuter students or reside at the Lynchburg Inn.
- Carpool spaces are reserved by signage and are located in PM04a and PN02
- Carpool space restrictions are enforced from midnight to 4:30 PM Monday – Friday on regular school days only. The university reserves the right to request the spaces vacated by 4:30 PM for university events.
- Carpool hangtags are permitted in the designated carpool spaces or other commuter parking lots (CPM, CPN, CF1, CF2, C1, C2, C3, or C5); **parking in all other areas prohibited.**
- Carpool hangtag may be used on any vehicle registered on the carpool application form that meet the registration AND insurance requirement (both checked). You may still participate if BOTH conditions are not true, but you cannot use that vehicle to carpool with.
- Failure to properly display carpool hangtag while parked in a carpool space will result in a citation and may be towed at owner's expense. Citations issued to the person that owns the vehicle being cited.
- Night and Weekend permit holders may park in any commuter or student parking lot between 4:30 PM – 6:00 the following morning and all day on the weekends. Parking in commuter student areas is also approved during school closings, university holidays, and the finals week.
- The conditional use permit (CUP) can only be displayed on a vehicle that is registered with your carpool and that properly displays the Commuter Nights and Weekend (CNW) permit.
- Abuse of the carpool permit by use of those that are not in the carpool, family members, non student, or others not authorized to use the Carpool permit may result in the confiscation of the permit and/or disbanding of the carpool.
- If the carpool is disbanded, individual parking permits must be obtained and the carpool permit must be returned along with all of night and weekend permits. Individuals have 10 days to join another carpool.
- Each carpool is self governed in all areas not specifically noted above; the institution will not arbitrate disputes nor will be held responsible for actions or inaction by those in your carpool.



Disclaimer and Release

Liberty University, Liberty University Police Department, or LU Transit Services assume no responsibility for any errors, omissions, delay, damage, and/or injury due to participation in the carpool program.

Liberty University, Liberty University Police Department, or LU Transit Services assumes no liability whatsoever for the loss or damages to any vehicle and/or its contents, or for injury or death of any person, which arises in the course of, in connection with or as a result of the carpool program, including, without limitations, vehicle accidents, driving infractions, and incidents involving carpool participants.

Liberty University, Liberty University Police Department, or LU Transit Services is not responsible for ensuring the quality or licensing of drivers that participate in the carpool program, or for ensuring that vehicles of participants are road worthy and properly insured.

The undersigned have read and understood the rules and the disclaimer/release.

Carpool Leader: _____

Participant 2: _____

Participant 3: _____

Participant 4: _____

[Signature]

[Print Name]

[Date]

2008-09 Liberty University Carpool Registration Form

All carpool members must complete and sign this form and must have signed the application form on the previous page. Return this form in person with your entire carpool to LUPD. Print Legibly.

Carpool Leader		<input type="checkbox"/> Vehicle registered in my name	<input type="checkbox"/> Insurance is sufficient to participate in program	
LAST Name	FIRST Name	Local Address		
LU ID #:	Phone	E-Mail:		
License Plate # (State)	Make/Model/Year/Color	Insurance Company	Permit Tag # (LUPD)	
I certify that all the information is true and I will notify LUPD of any changes.		Signature: _____ Date: _____		
Participant #2		<input type="checkbox"/> Vehicle registered in my name	<input type="checkbox"/> Insurance is sufficient to participate in program	
LAST Name	FIRST Name	Local Address		
LU ID #:	Phone	E-Mail:		
License Plate # (State)	Make/Model/Year/Color	Insurance Company	Permit Tag # (LUPD)	
I certify that all the information is true and I will notify LUPD of any changes.		Signature: _____ Date: _____		
Participant #3		<input type="checkbox"/> Vehicle registered in my name	<input type="checkbox"/> Insurance is sufficient to participate in program	
LAST Name	FIRST Name	Local Address		
LU ID #:	Phone	E-Mail:		
License Plate # (State)	Make/Model/Year/Color	Insurance Company	Permit Tag # (LUPD)	
I certify that all the information is true and I will notify LUPD of any changes.		Signature: _____ Date: _____		
Participant #4		<input type="checkbox"/> Vehicle registered in my name	<input type="checkbox"/> Insurance is sufficient to participate in program	
LAST Name	FIRST Name	Local Address		
LU ID #:	Phone	E-Mail:		
License Plate # (State)	Make/Model/Year/Color	Insurance Company	Permit Tag # (LUPD)	
I certify that all the information is true and I will notify LUPD of any changes.		Signature: _____ Date: _____		