

IONA COLLEGE VEHICLE REGISTRATION

DECAL # _____

LICENSE PLATE # _____

NAME: _____
Last First M.I.

ADDRESS: _____
No. & Street City State Zip

PHONE: _____ Iona 7 digit ID _____

MAKE OF CAR	MODEL	COLOR	STATE	YEAR

STUDENT - DAY

STUDENT - EVENING

FACULTY / STAFF

ADJUNCT FACULTY

DATE ISSUED _____