



CLERGY PARKING CARD APPLICATION

Applicant Name (Please Print) _____ Date _____
(Last) (First) (MI)

Home Address _____

City _____ State _____ Zip _____ Home Phone _____

Religion/Denomination _____ Position requiring parking card _____

Name of Congregation/Institution served _____

Congregation/Institution Address _____

City _____ State _____ Zip _____ Office Phone _____

Fax _____ E-mail _____ / _____
(office) (home)

Status (please check):

- Ordnained Clergy, Religious leader of congregation, Associate Clergy, Institutional Chaplain, Judicatory Staff, Lay Minister (signed authorization from the religious leader of the congregation required below)

Authorized by (print name & title) _____ (Name) (Title)

Authorizing Signature _____

License Plate Number (maximum of 2) #1 _____ #2 _____
(Application cannot be processed without License Plate #)

Application for (please check one) _____ NEW CARD _____ RENEWAL _____ LOST CARD _____ CHANGES

FEE \$25.00. Please make check payable and mail with a self addressed stamped envelope to:
InterFaith Works CNY, 3049 E. Genesee St, Syracuse, NY 13224

CLERGY HOSPITAL PARKING CARD AGREEMENT

InterFaith Works issues the Clergy Parking Card for use at Crouse, Upstate, St. Joseph's and Community Hospital for a period of one year. The expiration date is indicated on the card. It is your responsibility to renew the card annually and to be sure that you use the current application form. (Please allow three weeks from the application date for the card to be issued). This parking privilege is given with the understanding that members of the clergy, religious and appropriate lay persons involved in pastoral ministry will abide by hospital regulations concerning patient visitation. Persons providing pastoral care services may call on hospitalized persons from their own congregations as well as patients to whom they are specifically referred by hospital staff, hospital chaplains, or patient's family. No other authorization for hospital ministry is implied by this card. The parking privilege conferred by this card is not transferable. The card may be used only by the person to whom it is issued and only for the purpose of pastoral visitation. Abuse of this privilege can result in revocation of the right to use your card. I have read the above statement and agree to the terms herein.

Applicant Signature _____ Date _____

Office use only: Date Rec'd _____ Paid \$ _____ Card issued _____ Card # _____
January 2009