

**LUTHER MEMORIAL CHURCH**  
**RULES AND REGULATIONS FOR LMC MEMBERS/CDC PARENTS**  
**PARKING LOT/TUNNEL DOOR ACCESS CARD**

1. Parking in the Mills-Johnson Street parking lot and entry through the tunnel door by use of an access card are for members of Luther Memorial Church while on church business during CDC hours and for parents of the LMC Child Development Center while dropping off and picking up children from the Center.
2. For non-LMC or non-CDC use of the parking lot, parking contracts are available on a semester basis. Please contact the church office at 258-3160.
3. Neither LMC nor the CDC is responsible for theft or damage to vehicles parked in the lot or the parking garage.
4. Access to the lot and the tunnel door is provided by agreeing to all rules and regulations and upon the receipt of \$25.00 as a deposit for the access card. These access cards are the property of Luther Memorial Church and should not be marked in any way. A deposit of \$25.00 is required for the first card, which will be repaid within 21 days when the card is returned or forfeited if the card is lost or stolen. The deposit amount increases each time by \$25.00, i.e., 2<sup>nd</sup> deposit = \$50.00, 3<sup>rd</sup> deposit = \$75.00, etc. when the card is lost or stolen and a replacement is necessary.
5. The City of Madison issues tickets to illegally parked vehicles. Please make sure that your parking permit is affixed to the lower left inside windshield area (driver's side).
6. Please keep your vehicle information current with the church office. Your permit and access card are good for one vehicle only.
7. When this form is completed, please call and make an appointment with the Church Administrator to have an access card programmed.
8. Please use your access card for entering the tunnel door only during CDC hours as posted on the tunnel door. The building alarm will be set off if the card is used when the alarm system is on nights, some weekends, and holidays.

Signed on \_\_\_\_\_, 20\_\_\_\_  
**Luther Memorial Church**

By \_\_\_\_\_  
Kim E. O'Leary, Church Administrator  
1021 University Avenue, Madison, WI 53715  
(608) 258-3160 ext. 14     [koleary@luthermem.org](mailto:koleary@luthermem.org)

I, the undersigned, have read, understood, and will abide by the above rules and regulations.

Name: \_\_\_\_\_ Printed \_\_\_\_\_ Signed \_\_\_\_\_

Address: \_\_\_\_\_ Street \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ (home) (\_\_\_\_) \_\_\_\_\_ (cell) \_\_\_\_\_ (email) \_\_\_\_\_

Vehicle Information: Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

Color \_\_\_\_\_ VIN# (last six digits) \_\_\_\_\_ License# \_\_\_\_\_ State \_\_\_\_\_

Deposit received for Access Card: \$ \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_ VISA/MC \_\_\_ Staff Initials: \_\_\_\_\_

Access Number: \_\_\_\_\_ Parking Sticker No. \_\_\_\_\_

I would like my deposit back when I return my access card. Initials \_\_\_\_\_ Date \_\_\_\_\_

I would like to donate my deposit amount to the LMC/CDC ministry of my choice:

Initials \_\_\_\_\_ Date \_\_\_\_\_ Ministry \_\_\_\_\_

Purpose/Use of Card \_\_\_\_\_ Length of Time Needed \_\_\_\_\_