

Millennium Garages Parking Registration Form



Company: **LOOP U**
Group: **Students**

Parker Application for: **GPN/GPS/MPG/EMG**
Date:

NEW ACTIVATION ____ (Start Date_____) CHANGE INFO ____ DEACTIVATION ____

Please complete this application and return it to the Garage Office where you would like to park, or fax it to 312-819-0814. For directions and additional information, please visit www.MILLENNIUMGARAGES.com or call 312.616.0600.

I want a Monthly Key Card! ☐

MONTHLY ACCESS RATES: (Circle which garage)

Grant Park North: **\$209.00/ month**
Grant Park South: **\$185.00/ month**
Millennium Park: **\$169.00/ month**
East Monroe Garage: **\$129.00/ month**

Rates include all taxes and are subject to change upon tax increase

MONTHLY NGHTS ONLY RATES: (Circle which garage)

Grant Park North Garage: **\$99.00/ month**
Grant Park South Garage: **\$99.00/ month**

I want a Daily Key Card! 1 in and 1 out per park. ☐

DAY RATES (Up to 12 Hours): (Circle which garage)

Grant Park North: **\$14.00—for up to 12 hours**
Grant Park South: **\$12.00—for up to 12 hours**
Millennium Park: **\$10.00—for up to 12 hours**

Regular rates will apply after 12 hours

Rates include all taxes and are subject to change upon tax increase

MONTHLY NGHTS ONLY RATES: (Circle which garage)

Grant Park North Garage: **\$9.00—for up to 8 hours**
Grant Park South Garage: **\$9.00—for up to 8 hours**

METHOD OF INVOICING AND PAYMENT

___ *Individual is responsible for payment*—To receive parking discount, you must sign up using monthly automatic credit card charge

___ *Company is responsible for payment (Company Contact_____)*

___ *Payment is made through WageWorks or Commuter Check*

MONTHLY PARKERS: Each parker is responsible for paying by the first of every month, without reminder; however, if you would still like to receive an invoice for your records, please select the method of delivery for invoices below:

_____ *No Invoice Needed* _____ *Email Invoice (Invoice will be emailed to address given above.)*

AUTOMATIC PAYMENTS:

TYPE OF CREDIT CARD: VISA ___ MC ___ AMEX___ NAME ON CARD:_____

CREDIT CARD NUMBER: _____ EXP : _____

Card Holder's Signature: _____ Date: _____

I authorize LAZ Parking Chicago, Inc. to charge the MONTHLY parking rate to my credit card each month. LAZ Parking reserves the right to terminate or refuse parking to any individual for any reason it deems appropriate. Card Holder has read the Terms and Conditions for the parking facility and understands and agrees to its contents.

DAILY PARKERS USING DAILY KEY CARDS:

PAYMENTS: All daily key cards are set up on a charge by usage program with a credit card on file. The daily key card will be linked to a credit card of your choice: VISA, MasterCard or American Express Only. Daily key card holders will receive their receipts via e-mail, please make sure to provide your e-mail address below.

PARKING: You shall use the daily key card to enter and exit the Millennium Garages. The appropriate parking charges will be deducted from your credit card on file. The daily key card cannot be used in conjunction with any other discounts. Use of the garages shall be pursuant to a license only; no bailment relationship shall be created.

LOST CARDS: The key card holder alone assumes all risk of loss or theft of the daily key card; LAZ Parking Chicago will replace a lost or stolen card for a \$25 replacement fee.

EXPIRATION/TERMINATION: LAZ Parking Chicago may terminate a key card at any time upon thirty (30) days notice. LAZ Parking Chicago reserves the right to immediately terminate the key card without notice in the event that you fail to comply with any provision of this agreement.

DRIVER INFORMATION ***REQUIRED

Last Name***		First Name***		Company, Suite #	
Street Address (if no company enter home address)***			Apt or Box #	City***	State***
Business/ Daytime Phone***			Evening Telephone		E-Mail Address***

VEHICLE INFORMATION (optional)

State/ License Plate #	Color
Year/ Make	Model

For Office Use Only

Location Number: _____ Access Card No.: _____ Start Date: _____ Employee Initial: _____