

APPLICATION FOR A COLLEGIATE INSIGNIA LICENSE PLATE

Please detach, fold and return this completed application with check (payable to UNCG Alumni Association) to:
The UNCG Alumni Association, PO Box 26170, Greensboro, NC 27403-6170

COLLEGE NAME: The University of North Carolina at Greensboro

NOTE: When applying for a Personalized Collegiate license plate, remember the letter prefix/suffix representing the college must still be the last letter on the plate. This only leaves four (4) spaces for a Personalized message. The four spaces may be a combination of letters or numbers, but cannot conflict with another classification of license plates.

Regular Collegiate Fee \$25

Personalized Collegiate Fee \$55

THE ABOVE FEES ARE ANNUAL FEES DUE IN ADDITION TO THE REGULAR LICENSE FEES.

Home Phone: (_____) _____ Office Phone: (_____) _____

**If personalized collegiate license plate desired, List choices in order of preference:
(remember college prefix/suffix is the first/last letter on the plate)**

1. G _____ 2. G _____ 3. G _____ 4. G _____ 5. G _____

NAME: _____
(To agree with certificate of title) First Middle Last

ADDRESS: _____

CITY STATE ZIP CODE

PLATE NUMBER VEHICLE IDENTIFICATION NUMBER
(Current North Carolina)

DRIVER LICENSE # YEAR MODEL MAKE BODY STYLE
(Current North Carolina)

Owner's Certification of Liability Insurance I certify for the motor vehicle described above that I have financial responsibility as required by law.	
_____ Print or type full name of insurance company authorized in N.C. – not agency or group	
_____ Policy number – if policy not issued, name of agency binding coverage	
_____ Signature of owner	_____ Date of certification