

ANNUAL FAMILY BUS REGISTRATION
(for students in grades K-12)

School Year _____

Parent/Guardian Name(s):

Mother _____
 First Name Last Name

Father _____
 First Name Last Name

Home Street Address _____
 City, State, Zip _____

(if applicable)
 Daycare Provider _____
 Daycare Address _____
 Daycare Phone _____

<u>Place of Residence</u>	<u>Place of Daycare (if applicable)</u>
(Check 2)	(Check 2)
_____ North of 21	_____ North of 21
_____ South of M21	_____ South of 21
_____ East of Wright	_____ East of Wright
_____ West of Wright	_____ West of Wright

Telephone Numbers:

Home Phone _____
 Mom's Work/Cell _____ Dad's Work/Cell _____

For Office Use Only	
Bus Number	_____
Bus Driver	_____

If your child needs to be dropped off/picked up at a residence other than your own, you must attach a written request with a schedule to this card. The request must be approved by the transportation supervisor, Mike Schmitt. Call Mike Schmitt w/ questions at 640-3230.

List all children in school from oldest to youngest:

Student Name(s)	Grade (in fall)	How often will he/she be riding the bus?		
		Daily	Occasionally	Never