## SCHOOL BUS REGISTRATION INFORMATION

STUDENT NAME:								
	LAST	FIRST						
PRIMARY 911 ADDRE (No P.O. boxes or R.R # please)	ESS:							-
WILL THE STUDENT F DAYCARE? ++ SECONDARY ADDI	REQUIRE PICK-UP OR D	ROP OF Y	F AT A N	LOCATI	ON OTI	HER TH	AN HOME	OR
	**************************************				<del></del>	<del></del>		
(Please select if this will be a pick-up or drop-off change)		PICK-UP				DROP-OFF		
SCHEDULE: (Please circle the appropriate	e days for scheduled changes;	)	М	TU	WE	TH	FR	
(Please circle school to be at SCHOOL: ELEMENTARIES:	HIGH SCHOOL		MIDDLE SCHOOL CHATHAM		INTERMEDIATE SCHOOL BALL			
WILL YOUR CHILD REG CARE FACILITY? TIMES: (Please circle time:	QUIRE TRANSPORTATI			Υ	ORE OF N TER SCI		SCHOOL C	HILD
IF YES:	NAME OF PROVIDER ADDRESS					1002		
	PHONE NUMBER							

PRE-K AND KINDERGARTEN STUDENTS ARE REQUIRED TO BE MET BY AN ADULT WHEN THEY ARE DELIVERED TO THE BUS STOP AT THE COMPLETION OF THEIR SCHOOL DAY. PRE-K AND KINDERGARTEN STUDENTS WILL NOT BE ALLOWED TO DISEMBARK THE BUS UNLESS AN ADULT IS PRESENT. IF NO ADULT IS PRESENT, STUDENTS WILL BE RETURNED TO AN APPRORIATE ELEMENTARY SCHOOL FOR PARENT PICK UP. PARENTS MAY GIVE WRITTEN PERMISSION FOR PRE-K OR KINDERGARTEN STUDENTS TO WALK HOME WITH SIBLINGS OR OTHER OLDER STUDENTS.

++ IF STUDENTS REQUIRE PICK-UP OR DROP-OFF AT SECONDARY LOCATIONS, ONLY ONE SCHEDULE CAN BE UTILIZED.

STUDENTS WILL NOT BE ALLOWED TO RIDE ALTERNATE BUS OR DISEMBARK AT A STOP OTHER THAN THEIR ASSIGNED STOP WITHOUT A SIGNED NOTE FROM THEIR PARENT/GUARDIAN.