



Date: _____

TRANSPORTATION FORM

If filling out this form for more than one child, please put the information for the youngest child first. Additional children can be entered in the sibling area. If your child is riding the bus please note that bus fees are **non-refundable**. Bus Fees can be paid in two installments 1/2 before child begins to ride and 1/2 by the end of January 2018. Post-dated cheques will not be accepted.

STUDENT INFORMATION			
Student Name:	Home Address:	Home Phone:	Gender/Grade:
Contact #1:	Relationship To Student:	Phone #:	Other #:
Contact #2:	Relationship To Student:	Phone #:	Other #:
Sibling #1 Name:	Sibling #2 Name:	Sibling #3 Name:	Sibling #4 Name:
Grade:	Grade:	Grade:	Grade:
PLEASE FILL OUT BOTH "TO SCHOOL" AND "FROM SCHOOL" SECTIONS			
TO SCHOOL		FROM SCHOOL	
<input type="checkbox"/> Student will walk to school		<input type="checkbox"/> Student will walk from school	
<input type="checkbox"/> Student will be dropped off by a Parent/Guardian		<input type="checkbox"/> Student will be picked up by a Parent/Guardian	
<input type="checkbox"/> Bus will pick up at home address		<input type="checkbox"/> Bus will drop off at home address	
<input type="checkbox"/> Bus will pick up at childcare address below		<input type="checkbox"/> Bus will drop off at childcare address below	
Childcare Address:		Childcare Address:	
Childcare Provider Name:		Childcare Provider Name:	
Phone #:		Phone #:	
Additional Information:		Additional Information:	
IF INVOICING IS REQUIRED PLEASE SPECIFY BELOW			
Band/Business Name:		Contact Person:	
Treaty #(if applicable):	Phone #:	Fax #:	

