



School Bus Registration Form

I, _____ give my permission for _____
Parent/Guardian Name Scholars Name

to ride the school bus provided by First Student and Riverbend Prep.

Please indicate the days/times your child will require transportation (check all that apply):

	Morning	Afternoon	Address for pick up/drop off:
Monday	<input type="checkbox"/>	<input type="checkbox"/>	_____ _____
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	
Friday	<input type="checkbox"/>	<input type="checkbox"/>	

Parent/Guardian contact information in the event we need to reach you regarding transportation:

Home Phone : _____

Cell Phone: _____

Work Phone: _____

Scholars will NOT be released from the bus unless a parent/guardian or authorized individual is at the stop to meet the scholars unless otherwise specified.

My child, _____, is in the Third grade or above and may be released from the bus without a parent/guardian or authorized individual at the stop.

Parent/Guardian signature: _____

Parent Signature: _____ Date: _____

PLEASE NOTE: Any changes to the above bus schedule must be made in writing and delivered to Nancy Gamez.

*** Just a reminder that the bus can arrive 10 minutes early or 10 minutes late. Please be mindful of arriving on time to the stop and courteous to the drivers. Any question you can call the school at 602-285-3003 or First Student at 602-484-7646. ***