

**BUS REGISTRATION FORM  
2017/2018 ACADEMIC YEAR**

<b>Student Information</b>			
Name:		Grade in 2017-2018:	
Name:		Grade in 2017-2018:	
Name:		Grade in 2017-2018:	
Name:		Grade in 2017-2018:	
<b>Address for morning pick-up:</b>			
<b>Address for afternoon drop-off (if different from pick-up address):</b>			
<b>Name and contact details of Parent(s) or Legal Guardian(s):</b>			
Person Name 1:		Relationship to Student(s)	
Contact Number:		Contact Email	
Person Name 2:		Relationship to Student(s)	
Contact Number:		Contact Email	
Desired start date of using the bus service:			
Frequency of Travel: tick as required	<input type="checkbox"/> Both Ways	<input type="checkbox"/> Morning Only	<input type="checkbox"/> Afternoon Only
<input type="checkbox"/>	By checking this box, I confirm that I have read the 'SCHOOL BUS TRANSPORTATION SERVICE 2017/2018 ACADEMIC YEAR AGREEMENT' regarding the School's bus service, and agree to the condition of the School's bus service.		
Parents or Legal Guardian's signature:			
Parents or Legal Guardian's name:			
<b>For Bus Coordinator Use Only</b>			
Bus Number:		Send info to Teachers:	
Bus Stop:		Issue route & rules to parents:	
Space on bus:		Enter on ISV database:	
Send info to Billing:		Student IDs:	