



Westminster School

# School Bus Service Request

## 2017/2018

Requesting Parent's Name \_\_\_\_\_  
Last First M.I.

Parent/Guardian 1 Telephone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Parent/Guardian 2 Telephone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

Student's Name	Sex	Entering Grade
_____	M F	_____
_____	M F	_____
_____	M F	_____

Last First M.I. Last First M.I. Last First M.I.

Type of Service:  Round Trip (a.m. & p.m.)  To School **Only** (a.m.)  From School **Only** (p.m.)

Morning Pick-up Address:

\_\_\_\_\_ Supervising Adult \_\_\_\_\_

\_\_\_\_\_ Telephone Number \_\_\_\_\_

\_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Subdivision \_\_\_\_\_ Nearest Intersection \_\_\_\_\_

Afternoon Drop-off Address (if different from above):

\_\_\_\_\_ Supervising Adult \_\_\_\_\_

\_\_\_\_\_ Telephone Number \_\_\_\_\_

\_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Subdivision \_\_\_\_\_ Nearest Intersection \_\_\_\_\_

Remarks

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Bus Registration Fee: \$90.00 (non-refundable)

Zone _____
Approved _____
Disapproved _____
Date _____