

White Pigeon Community Schools
Transportation Department

(269) 483-7439



Please fill in this form completely. It is very important for our office to have the most up to date information on all of the students we transport. If you have **any changes** during the year, such as telephone number , etc., please let our office know ASAP. **Also, please review the attached bus rules and consequences for breaking the rules, with your child(ren) and sign below.** Keep the rules for future review and return this sheet to the bus driver. Thank you.

LIST ALL YOUR CHILDREN THAT ARE ATTENDING WHITE PIGEON SCHOOLS.

<u>NAME OF STUDENTS</u>	<u>GRADE</u>	<u>BUS NUMBER</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(PARENT / GUARDIAN NAME)

(HOUSE NO. & STREET ADDRESS)

(HOME PHONE)

(DIRECTIONS TO YOUR HOME)

(NAME OF AN EMERGENCY PERSON)

(PHONE NUMBER)

LIST ANY OTHER IMPORTANT INFORMATION that would pertain to your child(ren): Is there a sitter, give name, address and phone number, is this for a.m., p.m. or both. Should your child(ren) go to a different place if we have an unexpected early dismissal. **Is there any medical information or condition that the driver should be aware of, etc.** If you need additional room write on the back of this form.

I HAVE REVIEWED THE BUS RULES AND PROCEDURES WITH MY CHILD(REN).

(Date)

(Parent / Guardian Signature)

PLEASE, IT IS VERY IMPORTANT TO RETURN THIS SHEET TO THE BUS DRIVER WITHIN THE NEXT **FIVE (5) DAYS.**