

KOBUSSEN BUSES LTD.

St. John Bosco & St. Peters Bus Registration Form 16-17

Student's Last Name

Student's First Name

Home Address

E-mail Address

Home Phone

Parent Work Phone

Parent Cell Phone

Grade and School entering in September 2016

- St. John Bosco 4K Grade
 St. Peters Grade

PICKUP

HOME

OTHER _____
Address of Pick UP *(only ONE Pick Up address)*

DROP OFF

OTHER _____
Address of drop off *(only ONE drop off address)*

Parent signature

Date

Date Received

Date Entered

Notes:

STAFF USE ONLY