

KOBUSSEN BUSES LTD.

EC & 4K Bus Registration Form

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

Sunset *ALL DAY*

Sunset $\frac{1}{2}$ *DAY* **AM** **PM**

PICK UP

Home

Other: _____

Address of Pick Up ** (only ONE pick up address) **

DROP OFF

Home

Other: _____

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

Date Received

Date Entered

Notes:

STAFF USE ONLY

Parent signature

Date