

## Elem K-5 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     K                       Sawyer     1<sup>st</sup>     2<sup>nd</sup>

Sunrise     3<sup>rd</sup>     4<sup>th</sup>     5<sup>th</sup>

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#### 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