

BUS ENROLLMENT FORM 2019-2020

Family Intellicor ID:
 For Office Use Only

Parent's Information			
Parent's Legal Last Name	Parent's Legal First Name	Parent's Legal Middle Name	
Address		City, State, Zip Code	County
Cell Phone ()		Email	
PLEASE, PLOT YOUR APPROXIMATE ADDRESS ON THE MAP ON THE BACK →			

Emergency Contact Information (Please, provide information for contacts, other than parents)			
Legal Last Name	Legal First Name	Relationship	Phone ()
Can this person pick up your child(ren) from school? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Children's Enrollment List		
This application is to enroll my children in the school bus:		
Student Name	Grade Level	Student Intellicor ID <i>Office Use Only</i>
1-		
2-		
3-		
4-		

Fees	Due	Paid / Receipt # <i>Office Use Only</i>
If your home is about 16 miles far from school, then you are spending about \$145 monthly on gasoline. Additionally, school bus will save you time, efforts, and car maintenance and depreciation.		
Registration Fees = Number of Children _____ X \$20		
Bus Fees <input type="checkbox"/> One Child \$145, <input type="checkbox"/> Two Children \$225, and <input type="checkbox"/> Three Children \$300		
TOTAL		

Required Parent/Legal Guardian Signature	
Signature: _____	Date: _____

Principal's Signature: _____ Date: _____

Children's Home Address: (Street, City, State, Zip Code)

Children Bus Stop Point: (For Office Use Only)

