

PALMER BUS SERVICE OF MAPLE RIVER

SCHOOL BUS REGISTRATION

Return to: Palmer Bus Service
PO Box 204 First Ave S., Amboy, MN 56010 507-674-3177

SCHOOL YEAR 20__ - 20__

SCHOOL ATTENDING: _____

GRADE: _____ DATE: _____

STUDENT NAME _____

STUDENT ADDRESS _____

PARENT/GUARDIAN NAME _____

PARENT/GUARDIAN ADDRESS _____

CELL PHONE NUMBERS _____

EMERGENCY CONTACT INFORMATION:

NAME _____

ADDRESS _____

PHONE NUMBER _____

THIS SECTION COMPLETED BY PALMER BUS SERVICE

AM ROUTE BUS # _____ TIME _____ AM SHUTTLE BUS # _____ TIME _____

LOCATION OF AM PICKUP _____

PM SHUTTLE BUS # _____ TIME _____ PM ROUTE BUS # _____ TIME _____

LOCATION OF PM DROP OFF _____

The above information is based on transportation to and from the home address.

*Please complete the other side of this form if your student needs to be picked up or dropped off **routinely** at a location **different** than their home.

CHILD CARE TRANSPORTATION REQUEST FORM

Maple River Schools #2135 & Palmer Bus Service Transportation Policy

ONLY TO AND FROM CHILD CARE SITE

SCHOOL YEAR 20__-20__

Transportation services to and from a child care site will be allowed under the following guidelines:

1. The child care provider must live within the attendance area of the school.
2. **The child must be picked up at the same location each day and dropped off at the same location each day.**
3. Arrangements must be made through the bus company and from the school.
4. All requests must be done in writing and kept on file with the school and the bus company.
5. Any changes in the students schedule after approval, must be resubmitted to Palmer Bus Service. All changes require at least (5) five working days to process. Some exceptions may apply.
6. Special arrangements must be made with Palmer Bus Service whenever a change occurs in the daily transportation schedule.

THIS SECTION COMPLETED BY PARENT/GUARDIAN

Student is to be picked up at: Home _____ Daycare _____

Name: _____

Address: _____

Phone Number: _____

Student is to be dropped off at: Home _____ Daycare _____

Name: _____

Address: _____

Phone Number: _____

I do hereby agree to hold the School District and Palmer Bus Service harmless of any damage resulting from granting this request.

Signed: _____ Date: _____
Parent/Guardian

Signed: _____ Date: _____
School Principal

Signed: _____ Date: _____
Palmer Bus Service

Return this form to your child's school of attendance or Palmer Bus Service