

## TRANSPORTATION TO A SECOND PRIMARY RESIDENCE

**SCHOOL YEAR****BUS ROUTE #**

**Phone: (780) 806-2054 or (780) 806-2052**

Last Name	First Name	Grade	School	DAYS OF WEEK (M,T,W,TH,F)

**PRIMARY RESIDENCE #1:**

Contact # 1 (Name): \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Contact #1 Primary Phone #: \_\_\_\_\_ Contact #1 Alternate Phone #: \_\_\_\_\_

Email Address:

Mailing Address: \_\_\_\_\_

Street # / P.O. Box #	Town	Province	Postal Code

Street (Physical) Address: \_\_\_\_\_

**(If street address is not shown, application will be returned)**

Schedule at Primary Residence #1: \_\_\_\_\_

**PRIMARY RESIDENCE #2:**

Contact # 2 (Name): \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Contact # 2 Primary Phone #: \_\_\_\_\_ Contact #2 Alternate Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Contact #2 Name & Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street # / P.O. Box #	Town	Province	Postal Code

Street (Physical) Address:

(If street address is not shown, application will be returned)

Schedule at Primary Residence #2:

Does your child have any medical, physical, intellectual, behavioral, or emotional needs that our bus contractor/driver should be made aware of before transporting your child(ren)? ☐ **YES** ☐ **NO**

If yes, please give details so we can ensure our bus drivers have this important information to ensure the safety of your child(ren).

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I have read and agree to the School Bus Rules and Regulations, click here ([701.7 AP](#)) ☐ **YES** ☐ **NO**

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**Bussing Rates:** Please note: bussing is available for year round only

1 Child (ECS – GR 12)	\$285.00/year
2+ Children – family rate (ECS – GR 12)	\$570.00/year

**PAYMENT ALTERNATIVES – CASH, CHEQUES (POST-DATED ARE ACCEPTABLE) AND MONEY ORDER**

<b>POSSIBLE PAYMENT PLAN OPTIONS:</b>	<u># of Cheques</u>	<u>Single Rate</u>	<u>Family Rate</u>
	5 payments of	\$57.00	\$114.00
	10 payments of	\$28.50	\$ 57.00

**Note:** Transportation to a Second Primary Residence is subject to availability, and space is limited. **Payment must be received before bussing begins.** If payment has not been received by your child's first day of bussing, your child's seat on the bus will not be held, and will be made available to another student. **Eligible passengers registered on one bus, riding on another bus to a second primary residence will be required to pay one of the above set fees. If you are ineligible from both locations you will be required to pay two fees.**

**FOR OFFICE USE ONLY:**Confirmed Registration at School ☐ \_\_\_\_\_ Faxed/Emailed to School ☐ \_\_\_\_\_Entered in TLS ☐ \_\_\_\_\_ Trans Code ☐ \_\_\_\_\_ Pass Type ☐ \_\_\_\_\_ Student Listing ☐ \_\_\_\_\_

Distance to First Primary Residence: \_\_\_\_\_ Fee: \_\_\_\_\_ Bus: Y/N

Distance to Second Primary Residence: \_\_\_\_\_ Fee: \_\_\_\_\_ Bus: Y/N

Comments: \_\_\_\_\_

Entered into Fee Spreadsheet ☐ \_\_\_\_\_Gave Parent PU/DO Times or Contractors/Drivers Phone #s ☐ \_\_\_\_\_**Primary Residence #1:**

Route #: \_\_\_\_\_ Date Bus Service Starts: \_\_\_\_\_

Stop #: \_\_\_\_\_ Stop Address: \_\_\_\_\_

Pick Up Time: \_\_\_\_\_ a.m. Drop Off Time: \_\_\_\_\_ p.m.

Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Bus Driver Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Notified Contractor ☐ \_\_\_\_\_Notified MD/County of New Pick Up ☐ Off Route ☐ On Route ☐**Primary Residence #2:**

Route #: \_\_\_\_\_ Date Bus Service Starts: \_\_\_\_\_

Stop #: \_\_\_\_\_ Stop Address: \_\_\_\_\_

Pick Up Time: \_\_\_\_\_ a.m. Drop Off Time: \_\_\_\_\_ p.m.

Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Bus Driver Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Notified Contractor ☐ \_\_\_\_\_Notified MD/County of New Pick Up ☐ Off Route ☐ On Route ☐**Requests/Action Taken:**


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Authorization: \_\_\_\_\_ Date of Authorization: \_\_\_\_\_