

BUS INFORMATION FORM

Child's Name: _____

Home Address: _____

Home Telephone: _____ **Child's Sex:** _____ **Age:** _____ **Birth Date:** _____

Father's Name: _____

Address, if different from child's: _____ **Phone Number:** _____

Place of Employment: _____ **Phone Number:** _____

Mother's Name: _____

Address, if different from child's: _____ **Phone Number:** _____

Place of Employment: _____ **Phone Number:** _____

Child's Living Arrangements: () Both Parents () Mother () Father () Other

Child's Legal Guardian(s): () Both Parents () Mother () Father () Other

The child may be released to the person(s) signing this agreement or to the following:

<u>Name</u>	<u>Address</u>	<u>Phone Number</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Person(s) to contact in case of emergency when parents cannot be reached:

<u>Name</u>	<u>Address</u>	<u>Phone Number</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____