

Daycare/Alternate Bus Registration 360-458-3300

School: _		Grade:	Start Date:
Student's legal name:			
	first		last
Parent/guardian name:			
-	first		last
Home add	dress:		
	Physical: Address	City	Zip
Parent/Guardian phone numbers:			
Нс	ome:	Work:	
Ce	ell:		
Day Care Name:		Phone:	
Day Care Address:			
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Transportation needs a regular daycare/alternate schedule for your student. Please check below the			
schedule that applies.			
	☐ My child will be attending daycare before and after school 5 days a week		
	☐ My child will be attending daycare before school 5 days a week		
	☐ My child will be attending daycare after school 5 days a week		
NOTE: Split schedules need to be on a day-to-day note system			
If your student plans on attending a daycare on a day-to-day schedule, please notify the school office. A			
note needs to be provided each day of the schedule in order for the student to be transported. Any questions, call transportation or your school office.			
NOTE: Change in daycare/alternate status			
This registration stays in effect until the student graduates, leaves the district or a new form is resubmitted. If there is a change to the location or time of day student needs transportation to daycare, please submit a new form to the school office.			
Parent/G	uardian Signature		_ Date:
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