BERNALILLO PUBLIC SCHOOLS STUDENT EMERGENCY PROCEDURE CARD

TRANSPORTATION DEPARTMENT

	Grade:	Date of Birth:	Bus #:
treet address	ScI	nool	
Parent/Guardian (Father)	(N	other)	
Pick up Address	Zip:	Phone number	(s):
Prop off Address		Zip	Language
ather's Work Phone	Mother's	Work Phone	
n case of emergency, illness or acc	cident the school is authorized	to proceed as indicated	d below:
lotify:	Relationship:	Phone:	
lotify:	Relationship:	Phone:	
mergency Facility Preference: is understood, further, that I will osts are otherwise observed by ins	pay for ANY Emergency Transp		
Date BE	Signature of Parent o		ROCEDURE CARD
ВЕ	RNALILLO PUBLIC SCHOOLS ST	FUDENT EMERGENCY PI	
ame:	RNALILLO PUBLIC SCHOOLS S' TRANSPORTA Grade:	FUDENT EMERGENCY PRATION DEPARTMENT Date of Birth:	Bus #:
BE Jame:treet address	RNALILLO PUBLIC SCHOOLS S' TRANSPORTA Grade: Sch	TUDENT EMERGENCY PRATION DEPARTMENT Date of Birth:	Bus #:
ame: treet addressarent/Guardian (Father)	RNALILLO PUBLIC SCHOOLS S' TRANSPORTA Grade: Sch	TUDENT EMERGENCY PRATION DEPARTMENT Date of Birth: ool other)	Bus #:
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