

MID-COLUMBIA  
BUS COMPANY, INC.  
60<sup>TH</sup> ANNIVERSARY



## SCHOOL BUS REGISTRATION FORM

STUDENT NAME:

PHYSICAL ADDRESS:

HOME PHONE:

CELL PHONE:

PARENT/GUARDIAN NAME:

SCHOOL ATTENDING:

GRADE:

DAY CARE ADDRESS:

DAY CARE PROVIDER NAME:

HOME PHONE:

CELL PHONE:

EMERGENCY CONTACT:

PHONE:

### Bus Registration

- To be filled out by ALL students on a bus route whether they ride the bus or not.
- One form to be filled out per family unless one student is a kindergartener.
- Kindergarten parents should fill out both forms if student is not being picked up by parents and they have siblings or another pick up adult at their bus stop.