

Student : New ___ Returning ___

Bus Registration Application Form 2018-2019

Please complete this form and return it to the transportation office for consideration. Once the form information is approved and entered in the database your student will be assigned to a bus (3 to 5 days). We will place them on a ROSTER for that bus ONLY . You then be notified by e-mail or text of the bus number, stop location, and approximate AM time. You can also sign into the EZRouting Parent Portal to check all information relating to your student(s). <https://guthrie.ezrouting.com>

PLEASE PRINT & USE ONE FORM PER STUDENT Date ____ / ____ / ____

Student Name : Last _____ First _____ M _____

Student ID # _____ Birth Date ____ / ____ / ____ School _____ Grade _____

Check all that apply : Mon ____ Tue ____ Wed ____ Thu ____ Fri ____ AM ____ PM ____

Parent(s) / Guardian(s) _____ Phone/Text # ____ - ____ - ____

Residency Address _____

City _____ Zip _____ Email Address _____

Housing Development _____

Mailing Address if Different _____

City _____ Zip _____

Parent(s) / Guardian(s) _____ Phone/Text # ____ - ____ - ____

Secondary Physical Address _____

City _____ Zip _____ Email Address _____

Housing Development _____

Mailing Address if Different _____

City _____ Zip _____

EMERGENCY CONTACT – other than parent(s) / guardian(s)

Name _____ Relationship _____ Phone/Text # ____ - ____ - ____

HEALTH INFORMATION - Does this student have any medical conditions or issues we should be aware of :

Such as asthma, allergies of any kind , diabetes, etc ... YES ____ NO ____

If Yes EXPLAIN : _____

The Current Parent/Student Bus Rider Handbook can be found on the district website under Transportation.

My student and I understand that we are responsible for and will comply with the information contained therein. Any violation of these rules may result in suspension/expulsion of transportation privileges.

PARENT SIGNATURE _____