PERRY TOWNSHIP SCHOOLS

TRANSPORTATION PARENT/GUARDIAN DESIGNEE FORM

THIS FORM MUST BE FILLED OUT COMPLETELY AND TURNED IN TO THE CHILD'S HOME SCHOOL.

NAME OF SCHOOL:	T	ODAY'S DATE:
NAME OF K-2 GRADE CHILD:		GRADE:
NAME OF K-2 GRADE CHILD #2:		GRADE:
NAME OF K-2 GRADE CHILD #3:		GRADE:
NAME OF PARENT/GUARDIAN:		PHONE:
HOME ADDRESS:		
BUS STOP LOCATION:		
BUS NUMBER:	APROX. STOP TIME: :	
PARENT/GUARDIAN SIGNATURE:		
NAME OF DESIGNEE:	DESIGNEE INFORMATION	
		(Relationship to child)
PHONE NUMBER: VEHICLE COLOR:		
NAME OF DESIGNEE #2:		
PHONE NUMBER:		(Relationship to child)
PHONE NUMBER: VEHICLE COLOR:		(Relationship to child)
	TYPE OF VEHICLE:	(Relationship to child)
VEHICLE COLOR:	TYPE OF VEHICLE:	(Relationship to child)
VEHICLE COLOR:NAME OF DESIGNEE #3:	TYPE OF VEHICLE:	(Relationship to child) (Relationship to child)