

Boyertown Area School District

Transportation Department

1131 Montgomery Avenue

Boyertown, PA 19512

NON-PUBLIC SCHOOL KINDERGARTEN TRANSPORTATION FORM

(Complete a separate form for each child)

Name of Child _____

School Child Attends _____

Kindergarten Session _____ AM _____ PM _____ Full Day

The policy for all kindergarten students who reside in the Boyertown Area School District states that all kindergarten students must have a parent, guardian, or other designated person present at the designated stop. Your help is requested so bus and van drivers can follow the established procedure for your child's safety. Please indicate below any and all individuals you authorize to meet your kindergarten child at their designated bus stop.

Mother _____ Father _____

Siblings _____

Responsible adult(s) other than parent/guardian and siblings:

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

I understand that if none of the above-named individuals are present at the bus stop for drop-off, my child will remain on the vehicle and will be taken back to the school they attend. In that event, I understand that it is my responsibility to go to the school my child attends and provide transportation home.

Signature of Parent/Guardian

Date

Name of Parent/Guardian (Printed)

Phone