



SAINT GABRIEL SCHOOL

REGISTRATION FORM 2019 – 2020 BUS SERVICE

Please return this form by April 22 to reserve your spot for the bus next year. **For current families**, a \$50 deposit will be deducted from your FACTS account on May 10. **For new families**, please return a \$50 check payable to Saint Gabriel School with your completed form to the school office.

Family Name _____

Home Address _____

Home/cell phone number for routine contact _____

Father/Guardian _____

(work)

(cell)

Mother/Guardian _____

(work)

(cell)

BE SURE TO SIGN UP FOR REACH ALERT FOR BUS NOTIFICATIONS.

Email Address (checked regularly) _____

Afternoon Drop Off (if different from home address – MUST be within current bus boundaries)

Address _____

Sitter/Guardian _____

Service:

AM/PM service _____

AM only service _____

PM only service _____

Name of Student Bus Riders

Grade for 2019-2020 school year (K-8 only)
