

**BUS REGISTRATION
2018-2019 School Year**

Parent's Name _____

Address _____

Phone _____

Name of Student	Grade (K -12)
_____	_____
_____	_____
_____	_____
_____	_____

Special Instructions: (based on approval by Transportation Committee)

Additional information to share with the bus driver: _____

Public School District: _____

I am aware of the rules for bus conduct that can be found in the handbook and I will discuss these with my child before he/she rides the bus this year.

Parent Signature: _____

FEES:

Full-Time Students:

1 Student - \$400.00
2 Students - \$600.00
3 Students - \$700.00

*Part-Time Students:

\$300.00
\$450.00
\$525.00

*Part time student rate is for students who (circle one):

1. only ride in the morning
2. only ride in the afternoon
3. ride two days both ways or less

List days here _____

Payment Due TODAY: please make check payable to PCGS.

Bus Transportation Director is Chris Fynaardt. Please call Chris with any questions regarding routes at 641-295-4354 or call PCGS at 628-2414.