

Society Office

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**TO BE COMPLETED BY FAMILIES LIVING OUTSIDE THE CITY OF EDMONTON
 AND SENIOR HIGH SHUTTLE RIDERS ONLY**

Transportation is not available in all areas. Routes are revised prior to the start of each school year. ESCE will try to accommodate as many transportation requests as possible, provided they are received prior to April 15, but cannot guarantee that all applicants will receive busing. Please contact our Transportation Coordinator at 780-408-7923 if you have any questions regarding the availability of busing. All arrangements will be confirmed in writing.

| TRANSPORTATION APPLICATION 2019 - 20 (Please print clearly) | | |
|---|------------------|-----------------------|
| Father's Name: | | Mother's Name: |
| Home Address: | City: | Postal Code: |
| Home Phone #: | Father's Cell #: | Mother's Cell #: |
| Email: | Father's Work #: | Mother's Work #: |
| Childcare provider: <small>(if applicable)</small> | Address: | Phone #: |

Updates of phone numbers (including cell phones) are imperative in the event the bus is cancelled.
 Please contact the Transportation Coordinator with all changes

| Student 1: | School: | Service required: |
|---|--------------------------------------|--|
| Name: | Grade: ____ | <input type="checkbox"/> Full time |
| Pick-up address: | <input type="checkbox"/> West | <input type="checkbox"/> Half-time |
| Drop-off address: | <input type="checkbox"/> Senior High | <input type="checkbox"/> Shuttle between NE & High School |
| Kindergarten only: <input type="checkbox"/> one way <u>or</u> <input type="checkbox"/> both ways | | <input type="checkbox"/> Casual (up to 5 rides per month at \$5.00 per ride) |
| Any medical or behavior concerns? | | |
| Student 2: | School: | Service required: |
| Name: | Grade: ____ | <input type="checkbox"/> Full time |
| Pick-up address: | <input type="checkbox"/> West | <input type="checkbox"/> Half-time |
| Drop-off address: | <input type="checkbox"/> Senior High | <input type="checkbox"/> Shuttle between NE & High School |
| Kindergarten only: <input type="checkbox"/> one way <u>or</u> <input type="checkbox"/> both ways | | <input type="checkbox"/> Casual (up to 5 rides per month at \$5.00 per ride) |
| Any medical or behavior concerns? | | |
| Student 3: | School: | Service required: |
| Name: | Grade: ____ | <input type="checkbox"/> Full time |
| Pick-up address: | <input type="checkbox"/> West | <input type="checkbox"/> Half-time |
| Drop-off address: | <input type="checkbox"/> Senior High | <input type="checkbox"/> Shuttle between NE & High School |
| Kindergarten only: <input type="checkbox"/> one way <u>or</u> <input type="checkbox"/> both ways | | <input type="checkbox"/> Casual (up to 5 rides per month at \$5.00 per ride) |
| Any medical or behavior concerns? | | |

***See back to enter additional students.**

I hereby certify that I have read, understand and agree with the terms and conditions for transportation services of The Edmonton Society for Christian Education (ESCE), as outlined in the Transportation Brochure, School Bus Safety Rules and Fee Schedule which are on our website: <http://www.edmchristian.org/admissions/school-bus-information>. I understand that failure to comply with these terms and conditions may result, at the option of ESCE, in the termination of this contract for transportation services.

Fees are subject to change



PARENT/GUARDIAN SIGNATURE(S) _____

DATE _____

| | | |
|---|--------------------------------------|--|
| Student 4: | School: | Service required: |
| Name: | Grade: ____ | <input type="checkbox"/> Full time |
| Pick-up address: | <input type="checkbox"/> West | <input type="checkbox"/> Half-time |
| Drop-off address: | <input type="checkbox"/> Senior High | <input type="checkbox"/> Shuttle between NE & High School |
| Kindergarten only: <input type="checkbox"/> one way <u>or</u> <input type="checkbox"/> both ways | | <input type="checkbox"/> Casual (up to 5 rides per month at \$5.00 per ride) |

Any medical or behavior concerns?

| | | |
|---|--------------------------------------|--|
| Student 5: | School: | Service required: |
| Name: | Grade: ____ | <input type="checkbox"/> Full time |
| Pick-up address: | <input type="checkbox"/> West | <input type="checkbox"/> Half-time |
| Drop-off address: | <input type="checkbox"/> Senior High | <input type="checkbox"/> Shuttle between NE & High School |
| Kindergarten only: <input type="checkbox"/> one way <u>or</u> <input type="checkbox"/> both ways | | <input type="checkbox"/> Casual (up to 5 rides per month at \$5.00 per ride) |

Any medical or behavior concerns?