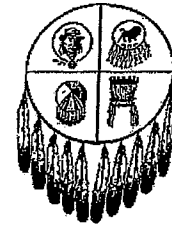


Peigan Board of Education
Transportation Department



2024/2025 School Year Bus Registration

First Name: _____ Last Name: _____

Date of Birth: Day: _____ Month: _____ Year: _____

Treaty Number: _____ Allergies: _____

Parent/ Guardian: _____

Home Telephone: _____ Cell Number: _____

Emergency Contact: _____ Relationship: _____

Home Telephone: _____ Cell Number: _____

School: _____ Grade: _____

Pick-Up & Drop-Off Point: _____

Legal Land Description/ Address: _____

Parent/ Guardian Signature: _____

One registration form per student. One pick-up, one drop-off; each student is registered to one bus ONLY. Return completed form to the bus driver or drop off at Board Office before June 24th2024; all late registrations will be put on a waitlist.

Office Use
Bus Driver & Route: _____
Approved Date: _____
Approved By: _____

Updated April 2024