



AMESBURY PUBLIC SCHOOLS

Where children come first!

APPLICATION FOR BUS TRANSPORTATION

School Year 2012-2013

INSTRUCTIONS:

Please fill out this school bus transportation application form if you want your child/children to use this service.

NO STUDENT WILL RECEIVE A BUS PASS WITHOUT A COMPLETED BUS FORM AND THE FIRST PAYMENT (AT LEAST 50% OF THE TOTAL). THE SECOND PAYMENT WILL BE DUE ON NOVEMBER 15TH. IF YOU PAY THE TOTAL AMOUNT BY OCT 1ST 2011, YOU MAY TAKE ADVANTAGE OF A REDUCED PRICE.

PAID IN FULL BY OCT 1ST: SINGLE RIDER: \$285.00 FAMILY CAP: \$427.50
NOT PAID IN FULL BY OCT 1ST: SINGLE RIDER: \$300.00 FAMILY CAP: \$450.00

Parent Name: _____ Date: _____

PLEASE PRINT

Address: _____ Phone: _____

Email Address _____

Please check all that apply:

- I live more than 2 miles from the school and my child (grades 1-6) is eligible for free transportation. Please fill in your child's/children's name(s), grade(s) and school(s) below.
- I live more than 2 miles and I wish to purchase a seat for my child (grades 7-12) if space permits. Please fill in your child's/children's name(s), grade(s) and school(s) below.
- I live less than 2 miles from school and I would like to purchase a seat on the bus for my child/children if space permits. Please fill in your child's/children's name(s), grade(s) and school(s) below.
- I am eligible for free or reduced lunch. (Please see criteria on the attached sheet).
- Kindergarten Student

Please print the following:

Student Name: _____ Grade: _____ School: _____

Student Name: _____ Grade: _____ School: _____

Student Name: _____ Grade: _____ School: _____

Student Name: _____ Grade: _____ School: _____

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Please visit our website <http://www.amesburyma.gov>

