



# SCHOOL DISTRICT NO. 57 (PRINCE GEORGE)

Transportation Department  
2100 Ferry Avenue  
Prince George, BC V2L 4R5

Phone: (250) 561-6802 or (250)561-6800 ext:305  
Fax: (250) 561-6809

## KINDERGARTEN SCHOOL BUS REGISTRATION – 20\_\_ / \_\_

### **STUDENT INFORMATION: Please PRINT LEGIBLY IN DARK INK**

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

Sex (M/F): \_\_\_\_\_ Birth Date (MM-DD-YYYY): \_\_\_\_\_

School Attending: \_\_\_\_\_ Pupil Number: \_\_\_\_\_

### **PARENT/GUARDIAN INFORMATION:**

**Father's Surname:** \_\_\_\_\_ **Father's First Name:** \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Father's Work Phone: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Living with Student?

Emergency Contact?

**Mother's Surname:** \_\_\_\_\_ **Mother's First Name:** \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Mother's Work Phone: \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Living with Student?

Emergency Contact?

**LEGAL CUSTODY ALERT IN EFFECT: YES\_\_\_ NO\_\_\_ (if YES, please provide PERTINENT INFORMATION)**

\_\_\_\_\_  
\_\_\_\_\_

**ALTERNATE EMERGENCY CONTACT PERSON:**

Full Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell # \_\_\_\_\_ Work Phone: \_\_\_\_\_

**PERTINENT MEDICAL INFORMATION:**

Allergies \_\_\_\_\_ Diabetes \_\_\_\_\_ Epilepsy \_\_\_\_\_ Heart \_\_\_\_\_ Mobility \_\_\_\_\_ Seizures \_\_\_\_\_  
Other \_\_\_\_\_

*Please note that all Kindergarten students must be accompanied to and from the bus stop by an adult. Transportation may be denied for kindergarten students who are not accompanied by an adult.*

*The information on this form is collected under the authority of the School Act, section 13. The information will be used by the School District No. 57 transportation contractor, and when required, may be provided to health services, social services or other support services as outlined in section 88 and 91 of the School Act. Information collected on this form will be protected under the Freedom of Information and Protection of Privacy Act. Questions about the collection and use of this information should be directed to the principal of your school or to the Freedom of Information and Protection of Privacy Officer, School District No. 57, 2100 Ferry Avenue, Prince George, B.C. V2L 4R5. Phone (250) 561-6800 Local 324.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN TO THIS FORM TO THE STUDENT'S SCHOOL 2021.01.28/kam**