Transportation Plan

Child's Name:	Date of Birth:
MY CHILD WILL ARRIVE AT THE PROGRAM:	MY CHILD WILL DEPART FROM THE PROGRAM:
Parent drop off	Parent pick up
Supervised walk	Supervised walk
Unsupervised walk	Unsupervised walk
Public/Private van	Public/Private van
Program bus/van	Program bus/van
Private trans. arranged by parent	Private trans. arranged by parent
Other	Other
Relea	ase of Child
following persons only (other than parent/guar listed below will be picking up my child that I m	release my child at the end of the school day to the rdian) . I understand that if any person other than those nust send notification in writing to school with my child ne parent/guardian, please indicate "NO ONE" below.
Name:	Relationship:
Address:	
Phone:	
Name:	Relationship:
Address:	
	Cell Phone:
Name:	Relationship:
	Cell Phone:
Danant/Cuandian Signature	Data
Parent/Guardian Signature	Date