



63 King Street East,  
Yorkton, Sask. S3N 0T7  
Toll free: 1-877-390-0899

Phone: (306) 786-5505

Fax: (306) 786-4791

Complete this form if student is a new registrant or if the pick up / drop off location has changed and submit to school office.

### Urban School Bus Student Registration Form

| Student Name (First and Last) | Age | Grade | School |
|-------------------------------|-----|-------|--------|
|                               |     |       |        |
|                               |     |       |        |
|                               |     |       |        |
|                               |     |       |        |

Name of Parent/Guardian (including surname if different) \_\_\_\_\_

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

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

Student(s) is living with:  Both Parents  Mother  Father  Guardian  Foster Care

Is there a custody order in place?  Yes  No

Alternate Drop-off Point, **on route**, and Telephone Number (In case of emergency):

\*Please list any health or other concerns of which the driver should be aware:

**PLEASE RETURN THIS COMPLETED FORM TO YOUR SCHOOL**

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

**SCHOOLS PLEASE FAX THIS FORM TO: Transportation Department (306) 786-4791**

**FOR OFFICE USE ONLY**

Bus Driver: \_\_\_\_\_

Bus No.: \_\_\_\_\_

Transportation Arranged on: \_\_\_\_\_

Parent Contacted

Bus Driver Contacted