LUCKIAMUTE VALLEY CHARTER SCHOOLS
STUDENT RIDER REGISTRATION FORM
MID COLUMBIA BUS CO., Inc.

Complete Separate Form for Each Student **DATE _____/_____/_____**

_____ _____
Print Student's Name Grade

Pick up – Bus # _____ Stop _____ **Alternate Bus #____ Stop** _____
Days of the week M TU W TH F M TU W TH F

Drop off – Bus # ____ Stop _____ **Alternate Bus # ____ Stop** _____
Days of the week M TU W TH F M TU W TH F

Guardian #1 _____ Phone #_____ Alt Phone_____

Guardian #2 _____ Phone #_____ Alt Phone_____

Day Care Name _____ Phone #_____ Alt Phone_____

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