

THIS FORM IS FOR LEWIS STUDENTS IN GRADES TK, KINDER, & 1ST

Parents: Please complete, sign and return this form to your child's bus drivers.

Date:	School:	
School Bus Stop (Name):		
A.M Route:	P.M. Route:	
Parents Name:		
Parents Phone #:		
Emergency Contact Name:		
Emergency Phone #:		
My child	Grade	may,
Please check which applies:	:	
1. Be picked up a	at the bus stop by parent only.	
2. Picked up by o	other. Please list name of persons allowed to pick u	ıp below.
3. My child is 7 y	years old or older and has my permission to walk h	ome alone.
It is required that you sign:		
Parent Signature:	Date:	

ANY DEVIATION FROM THE ABOVE MUST BE MADE IN WRITING