

2011-2012 Providence Catholic Busing Contract

1800 W. Lincoln Hwy., New Lenox, IL 60451 815-485-0638

Deadline: June 15, 2011

If this contract is received after June 15th, 2011,
It may be refused. If it is accepted, a \$100 late fee
will be added to your billing, and your student will
be assigned to a pre-existing bus stop.

Please Print

1. Name of student(s) _____ *Circle Grade for 2011-2012*
- | | | | | |
|----------|-----|-----|-----|-----|
| a. _____ | Fr. | So. | Jr. | Sr. |
| b. _____ | Fr. | So. | Jr. | Sr. |
| c. _____ | Fr. | So. | Jr. | Sr. |
2. Parent's Name: _____
3. Address: _____
4. City: _____ Zip+4: _____
5. Phone Number: _____
Emergency Phone Number: _____
-Are there any medications/medical conditions that the bus driver should be aware of?

6. Township: _____
7. Did any of your students ride the bus last year? ___ Yes ___ No
8. If your answer to 7 was yes, answer parts 8a and 8b; if no, go to 9.
a. What was the bus #: _____
b. What was the pick-up location: _____
9. Cross streets nearest your home: _____
10. Subdivision name (if applicable): _____
11. Corner where you would like pick up?: _____

We, the parents of the student(s) listed above, wish him/her/them to ride the Providence Catholic bus during the 2011-2012 school year. We understand that the bus transportation cost is an annual one, computed according to the scale given on the back; that our child(ren) will be entitled to daily bus rides to and from school beginning the first full day of classes in August; that there will be no daily collections, tickets or rebates; that the cost of the bus transportation will be added to the **tuition bill**, which must be paid in advance monthly, **together** with tuition and fees. **We understand that this contract is binding for the full school year, and we agree to pay the fee charged for our route. We understand this contract cannot be canceled.**

We understand that the activities bus may be provided but does not give the same type of service as the daily pickup and delivery home.

Both my child(ren) and I have read and will abide by the Policies & Fees page for Providence Catholic bus riders.

Parent's Signature _____ *Date* _____

Please return this signed contract by June 15th, 2011.