



2019-2020 School Bus Transportation Registration Form

Please complete and return by June 30th

Please Print

Parent/Guardian Information: _____

Parent Last Name

First Name

MI

Phone: _____ - _____ - _____

Email: _____

Address: _____

Student Information: #1 Student: _____

Last Name

First Name

MI

School: _____

Grade: _____

#2 Student: _____

Last Name

First Name

MI

School: _____

Grade: _____

#3 Student: _____

Last Name

First Name

MI

School: _____

Grade: _____

Transportation Fee:

The annual transportation fee for the 2019-2020 school year is **\$180 per student** for **all** students, grades K-12. The annual family cap is \$450.00.

Signature: (Parent or Guardian) _____ Date: ____/____/____

Please return with your payment to the Westwood Public Schools, 220 Nahatan Street, Westwood, MA 02090 by June 30th. There is no guarantee of a seat on the bus for registrations/payments received after the June 30th deadline. The transportation fee will be refunded if a seat is not available.

Rec'd in Business Office: ____/____/____	Amount: \$_____	Check #: _____
--	-----------------	----------------