STUDENT RIDER REQUEST FORM LAKE RIDE ACADEMY



In order for your child to ride the bus home with a current *Lake Ridge Academy bus rider*, parents <u>MUST</u> fill out this form and returned to the Transportation Director by NOON day of bus ride via email (<u>zepernicka@lakeridgeacdemy.org</u>).

STUDENT(S) NAME	GRADE		
HOME ADDRESS	HOME PHONE		
PARENT/GUARDIAN NAME	WORK PHONE	CELL PHONE	
PARENT/GUARDIAN NAME	WORK PHONE	CELL PHONE	
I would like my student(s)	transported to the	e following lo	cation:
PARENT/GUARDIAN NAME		EMAIL	
ADDRESS	CITY		
When will your child require	transportation?		
Before School Only	After School Only	,	Date Requested
PARENT/GUARDIAN SIGNATURE_			
All requests must be recei Any requests received afte	-	-	
FOR OFFICE USE ONLY:			

Date Request Received ______ Bus #_____ APPROVED_____ DENIED_____