

## CENTRALIA-CHEHALIS TRANSPORTATION CO-OP TRANSPORTATION FORM

Centralia-Chehalis Pupil Transportation Co-op, 1119 W Chestnut, Centralia, WA 98531 Phone 330-7628 Fax 330-7591

The following information must be completed in full in order for transportation to be provided.

**PLEASE PRINT CLEARLY IN INK**

Student Name:	Today's Date: / /	
School:	Grade:	Gender: M F
Home Address:	City:	Zip:
Mailing Address:	City:	Zip:
Parent/Guardian:	Home Phone:	
Work Phone:      Cell Phone:	Other Phone:	
Emergency Contact:	Emergency Phone:	

**PICK UP LOCATION**

(Please make a selection below)

- No transportation needed
- Pick up at home address listed above
- Pick up at childcare provider listed below

**DROP OFF LOCATION**

(Please make a selection below)

- No transportation needed
- Drop off at home address listed above
- Drop off at childcare provider listed below

Business or Daycare name:	Business or Daycare name:
Contact Person	Contact Person
Phone:	Phone:
Address:	Address:
Additional Comments:	Additional Comments:

In order to provide you child with school transportation, it is necessary to have accurate and current information. If CHANGES occur in any of the above information (i.e. student moves, changes in childcare), please contact the Centralia-Chehalis Pupil Transportation Co-op Immediately at 330-7628.

**Official Use Only**

Information Obtained By: School      Parent	START DATE	DISTRICT ID #	AM   PM   ALL DAY
Updated / /	AM ROUTE NO. & TIME	MIDDAY ROUTE NO. & TIME	PM ROUTE NO. & TIME
Updated By:	# :	# :	# :
New Student   Address Update	AM STOP LOCATION	MIDDAY STOP LOCATION	PM STOP LOCATION
Phone Update   Stop Update			