

THIS SHEET DUE TO COMPASS 7/31/18

KEEP THE SCHEDULE FOR REFERENCE

OCEAN STATE TRANSIT

SCHOOL BUS REGISTRATION FORM – The Compass School

Please check one of the following:

- New Registration (section A & B) Withdrawal (section A)
- Change of Address (section A & B) Transfer for Daycare Purposes (A,B & C)
(Must be for entire week 5 days)

This form is only valid for current school year. A new form must be completed before school starts each year. If there is a joint custody agreement, please fill out a separate form for each parent.

A

Student's Name: _____ Grade: _____

Address: _____
Current / Home Address

City: _____ State: **R.I.** Zip Code: _____

Emergency Contact Name (s): _____

Phone: _____ Emergency Phone: _____

Requested Effective Date: _____ Please Allow 3 Business Days

Please refer to the enclosed schedule for the Bus # and Location of pick-up/drop off

B

Bus Information Effective Date: _____

Bus # _____ Location _____

 ___ Mon ___ Tue ___ Wed ___ Thu ___ Fri
 __AM __ PM __AM __ PM __AM __ PM __AM __ PM __AM __ PM

Please Allow 3 Business Days

C

Daycare Provider's Name: _____

Daycare Address: _____

City: _____ State: **R.I.** Zip Code: _____

(Please Check Below Which One Will Apply)

Daycare Phone: _____ Before School After School Both

Please Allow 3 Business Days