

WESTSIDE SCHOOL BUS ENROLLMENT FORM FOR 2011-12 SCHOOL YEAR

Please complete and return this form to Rob Kodama at Crespi Carmelite High School

Student's Name: _____

Address: _____ **Zip Code** _____

Grade Next August: _____ **Home Phone:** () _____

Mother/Guardian's Name: _____ **Cell Phone:** () _____

Father/Guardian's Name: _____ **Cell Phone:** () _____

E-mail Address: _____ **Emergency Phone:** () _____

Emergency Contact: _____ **Relationship:** _____

- EXPRESS BUS #1 (Please circle)**
1. 4th Street and Santa Monica
 2. Pico and Centinela
 3. Sepulveda and Moraga
 4. Ventura and Haskell

EXPRESS BUS #2

OTHER: _____

I am requesting the above circled stop. If I have proposed a stop written in "OTHER" above, I understand it can only be considered if at least 5 families indicate the same request and the school has approved the stop location. Bus service is being provided by Tumbleweed Transportation "TT" under contract with Crespi Carmelite High School. The fee for the bus service is \$2900.00 for round trip service and \$2000 for one-way service for the 2011-12 school year. Enclosed is my deposit check for \$1000.00. My child has permission to ride the school bus each school day for the entire 2011-12 year. I understand that the receipt of this enrollment form does not in itself ensure that my child has reserved a seat on any bus. Only when I have received written confirmation of the bus assignment will my child be guaranteed such a space. Once my child has been assigned a space on the bus, I agree to pay the balance of the bus fee as billed to my child's Crespi tuition and fees account. The transportation fee is completely non-refundable. There will be no refunds or pro-ration of bus fees under any circumstances, this is a year-long commitment. In an emergency, TT has my permission to obtain medical treatment for my child. My child and I agree to abide by all school bus rules as established by TT and Crespi Carmelite High School.

Understood and Agreed By: (Print Name) _____

Signed: _____
(Signature of Parent/Legal Guardian)

Date: _____