

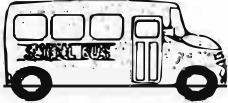
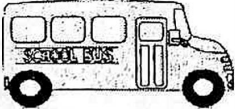

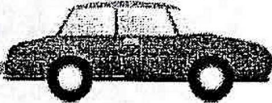

Afternoon Transportation Form 2019-2020

This form will establish my child's afternoon transportation arrangements for the school year. I understand that any changes to this plan must be made in writing. An Afternoon Transportation Change Form is available through the school's front office or website, baggettes.org

Student Name _____ Teacher _____ Grade _____

Parent Signature _____ Date _____

Be sure to place a ✓ to indicate a plan for EVERY day of the week.

		MON	TUE	WED	THU	FRI
	Bus # _____ to home address.					
	Bus # _____ to the following address:					
	Name of after-school daycare provider: _____					
	Car Rider # _____					
	Walker <i>(Must be picked up by an authorized adult from the Media Center at dismissal time)</i>					

Baggett Student Information Sheet

Grade Level _____ Teacher's Name _____

Student's Name _____ Birth Date _____

Address _____ City _____ Zip _____

Parent/Guardian Name _____ Relationship _____

Cell Number _____

Work Number _____

Home Number _____

Parent/Guardian Name _____ Relationship _____

Cell Number _____

Work Number _____

Home Number _____

Emergency Contact Name _____ Relationship _____

Cell Number _____

Work Number _____

Home Number _____

Emergency Contact Name _____ Relationship _____

Cell Number _____

Work Number _____

Home Number _____

Emergency Contact Name _____ Relationship _____

Cell Number _____

Work Number _____

Home Number _____

Does your child have any allergies or medical conditions we should know about?

Will your child regularly take medication at school? _____

Asthma _____ Seizure Disorder _____ Diabetes _____ Heart condition _____

EPI Pen? _____ Inhaler at school? _____

Does your child have any food allergies or food restrictions? Please explain:
