Busing Information New Registrations or Change of Address

If your child will be riding a school bus, the Medical Lake School District Transportation Department needs the following information from parents when they register their children: (If pick-up and drop-off varies, please provide a more detailed schedule)



Student 1	Name (Please print	*)	Parent Name		
Grade Level	AM Kinder/	PM /Pre		Parent Phone(s)	
SCHOOL:	ANDERSON	HALLETT (Circle One)	MS	HS	
PICK UP LOCATION(S): (Home, Daycare, etc)					
ADDRESS 1		ADDRESS 2 if needed		ADDRESS 3 if needed	
ADULT NAME		ADULT NAME		ADULT NAME	
PHONE NUMBER(S)		PHONE NUMBER(S)		PHONE NUMBER(S)	
DAYS OF THE WEEK (please circle) M TU W TH F		DAYS OF THE WEEK (please circle) M TU W TH F		DAYS OF THE WEEK (please circle) M TU W TH F	
DROP OFF LOCATION(S): (Home, Daycare, etc.)					
ADDRESS 1		ADDRESS 2 if needed		ADDRESS 3 if needed	
ADULT NAME		ADULT NAME		ADULT NAME	
PHONE NUMBER(S)		PHONE NUMBER(S)		PHONE NUMBER(S)	
DAYS OF THE WEEK (please circle) M TU W TH F		DAYS OF THE WEEK (please circle) M TU W TH F		DAYS OF THE WEEK (please circle) M TU W TH F	

Note: Please provide the information listed above when registering so that routes can be set. Parents of students registering the week before the start of school, may be asked to transport their child until routing changes can be made. **Bus stops will be assigned as soon as possible, once the information is compiled.**