

Otsego Local Schools Transportation Department

New Student Registration/Change of Address

This form must be filled out and returned on the day of registration. If your child needs to be taken to an alternative location for childcare, you must fill out an Alternate Transportation Request form.

Student's Name _____ Grade _____

Street Address _____ P.O. Box _____

City _____ Home Phone _____

Nearest cross roads _____

Identifying features of your home (color, fences, etc.) _____

Date Transportation is to begin _____ Birthday _____

Mother's Name _____ Work Phone _____

Father's Name _____ Work Phone _____

Emergency Contact Name _____ Phone _____

Any medical conditions or instructs? Please explain _____

My Preschool or Kindergarten child may be released at the bus stop to the following individuals in addition to the parents/guardians:

Name _____ Relationship _____ Name _____ Relationship _____

Name _____ Relationship _____ Name _____ Relationship _____

An adult must be present for the driver to release a preschool or kindergarten student from the bus.

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-For Transportation Department Use Only-

Date Received \_\_\_\_\_

AM Bus \_\_\_\_\_

PM Bus \_\_\_\_\_

Kdg. Midday Bus \_\_\_\_\_

Bus Stop Location \_\_\_\_\_ Pick Up Time \_\_\_\_\_