

**Grace Academy
Bus Registration Form
School Year 2018-2019**

I _____ have contacted the appropriate transportation department in PA to register my student(s) to ride the bus for the 2017-2018 school year.

Please ✓ the appropriate bus district:

___ *GREENCASTLE* ___ *TUSCARORA* ___ *WAYNESBORO*

GREENCASTLE SCHOOL DISTRICT - 717.597.3226 x 50507
TUSCARORA SCHOOL DISTRICT - 717.328.3127 x 2808
WAYNESBORO SCHOOL DISTRICT - 717.762.1191 x 1264

Students Name(s) _____	Grade _____
_____	Grade _____
_____	Grade _____

Will Ride Bus to School: ___ *Yes* ___ *No*
Will Ride Bus Home: ___ *Yes* ___ *No*

For Inclement Weather Early Dismissal:

Will ride the Bus: ___ *Yes* ___ *No*

If you checked no, give name of person picking up student(s)

Name: _____
Phone #: _____
(cell) _____

Emergency Contact Information:

1 – Name: _____ cell # _____
2 – Name: _____ cell # _____

Parent Name (please print) _____