



2018-2019

BUS TRANSPORTATION

Dear Parent:

Some of you have arranged for your child to be transported by bus for the upcoming JCC nursery school year. We need to be aware of your bus transportation plans for your child

Child's Name: _____ Bus Company & Contact Number _____

Child's Class and Room #: _____

Days child travels on bus: (Please check appropriate spaces)

Monday

_ 9:00 AM arrival
_ 11:45 AM going home
_ 3:00 PM going home

Tuesday

_ 9:00 AM arrival
_ 11:45 AM going home
_ 3:00 PM going home

Wednesday

_ 9:00 AM arrival
_ 11:45 AM going home
_ 3:00 PM going home

Thursday

_ 9:00 AM arrival
_ 11:45 AM going home
_ 3:00 PM going home

Friday

_ 9:00 AM arrival
_ 11:45 AM going home
_ 3:00 PM going home

Parent Signature: _____ Date: _____

Your telephone number to confirm bus plan: _____

Please advise teacher about child's bus schedule. A written message about his/her bus schedule is required. **Please remember to call your bus company to let them know if your child is sick and won't be coming to school and when you want the bus company to resume pick up.**

Thank you.