

**GRAND RAPIDS AREA CATHOLIC SCHOOLS TRANSPORTATION DEPARTMENT**

**Transportation for the 2017-2018 School Year**

**High School – Elementary siblings only**

**Only one form per family needs to be completed**

**Parent Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Home phone:** ( ) \_\_\_\_\_

**City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_ **Emergency Phone:** ( ) \_\_\_\_\_

<b>Student's Name</b>	<b>School Name</b>	<b>Grade Entering</b>	<b>Morning?</b>	<b>Afternoon?</b>
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

If you have already have used the service, please indicate your current bus stop location(s) below:

**A.M.** \_\_\_\_\_ **P.M.** \_\_\_\_\_

**Please circle the School District in which you live:**

Byron Center	East Grand Rapids	Grand Rapids	Kenowa Hills	Rockford
Caledonia	Forest Hills	Grandville	Kentwood	Sparta
Comstock Park	Godfrey Lee	Hudsonville	Lowell	Wyoming
Coopersville	Godwin	Kelloggsville	Northview	Other _____

**Grand Rapids Area Catholic School Transportation Cost is as follows:**

<b>High School student</b>	<b>\$300 one way</b>	<b>\$400 round trip</b>
<b>Family (including Elementary)</b>	<b>\$500 one way</b>	<b>\$600 round trip</b>

- **Requesting transportation does not ensure that we will be able to provide it for you.** You will be informed if transportation will not be provided for your student by the Transportation Department, and if necessary, a reimbursement will be issued.
- There will be no “mid-day” Kindergarten transportation runs.

**DECLARATION OF PARENT(S)/GUARDIANS(S)** (both parents/guardians must sign)

I/we have read and understand this Grand Rapids Area Catholic Schools’ Transportation Contract. With this understanding, I/we wish to register our student for Grand Rapids Area Catholic Schools Transportation.

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

Please submit this form to the Grand Rapids Catholic Secondary Schools Business office with your enrollment documents via mail or fax to the following: GRCSS/Pam Sischo 360 Division Ave S Grand Rapids MI 49503 Fax 616-514-6097