

**CUMBERLAND VALLEY SCHOOL DISTRICT
TRANSPORTATION NOTICE**

DATE: ROOM #: GRADE:

CHILD'S NAME:

PARENT/GUARDIAN SIGNATURE:

PARENT/GUARDIAN CONTACT #(s):

.....
TO SCHOOL:

BUS #: FROM (Address):

BUS STOP LOCATION:

.....
FROM SCHOOL:

BUS #: TO (Address):

RECEIVING ADULT & PHONE #:

.....
MY CHILD WILL NOT RIDE A BUS TODAY DUE TO: (Select One)

PARENT PICK-UP: TUTORING:

AFTER SCHOOL CLUB (Fill in Name of Club):

NAME OF PERSON PICKING UP MY CHILD/RELATIONSHIP/PHONE #

PHONE NUMBER FOR ABOVE:

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