



# Important Information for the First Day of School



Please fill out the information below and send it to school with your child the First day of school OR bring it to Back-to-School Night on Thursday, August 30<sup>th</sup>. Thank you!

If you need to call the bus garage for some information, the phone number is 885-7146; talk with Carol Ann.

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Name: \_\_\_\_\_

Physical address of where your child will go after school:

\_\_\_\_\_

Is it home, Daycare, or other:

\_\_\_\_\_

Bus number & driver - after school: \_\_\_\_\_

Number to be reached during the day: \_\_\_\_\_

## Other information

Allergies, medical problems, vision/hearing problems, or other concerns:

\_\_\_\_\_

\_\_\_\_\_

Other information school should know:

\_\_\_\_\_

\_\_\_\_\_

Bus number & driver - ride to school: \_\_\_\_\_