

Saanich Schools



2125 Keating Cross Road
Saanichton BC, V8M 2A5

SCHOOL BUS REGISTRATION FORM

**PLEASE RETURN THIS REGISTRATION FORM WITH PAYMENT
TO THE SCHOOL BOARD OFFICE OR YOUR SCHOOL**
To guarantee routes and available seating, early registration is encouraged.

SD63 school bus transportation is not tax deductible so therefore receipts will not be issued.

Faxes will only be accepted with complete credit card or online details included.
If you choose to fax, DO NOT send the original, otherwise duplicate payment may occur.
Fax number 250-652-6421

The cost is:

\$200.00 per year per student for the 1st and 2nd child in a family

\$100.00 per year for the 3rd and 4th child in a family

*The maximum per family is \$600.00 per year

Riding Start Date: _____	Check if applicable: First Nations Status on Reserve <input type="checkbox"/> International Fee Paying <input type="checkbox"/>		
Parent's/Guardian's Name: _____	Cell or Work #: _____		
Address: _____	Postal Code: _____		
_____	_____	_____	_____
Child's Name (First & Last)	School in Sept/11	Grade in Sept/11	Student No
_____	_____	_____	_____
Child's Name (First & Last)	School in Sept/11	Grade in Sept/11	Student No
_____	_____	_____	_____
Child's Name (First & Last)	School in Sept/11	Grade in Sept/11	Student No
_____	_____	_____	_____
Child's Name (First & Last)	School in Sept/11	Grade in Sept/11	Student No
_____	_____	_____	_____

Indicate Payment Option: **Cheque(s)** – Attached (Post dated cheques are acceptable)
 Online – *Bank Name:* _____ *Date Paid:* _____
 Cash
 Credit Card

I, _____ hereby authorize School District No. 63 (Saanich)
 PRINT CLEARLY (NAME ON CARD) to charge my Visa or MasterCard as follows:

Date: _____ Amount: \$ _____

Type of card: Visa MasterCard (circle one) After processing card information will be destroyed

Card #: ____/____/____/____/____/____/____/____/____/____ Expiry Date: ____/____

Signature: _____