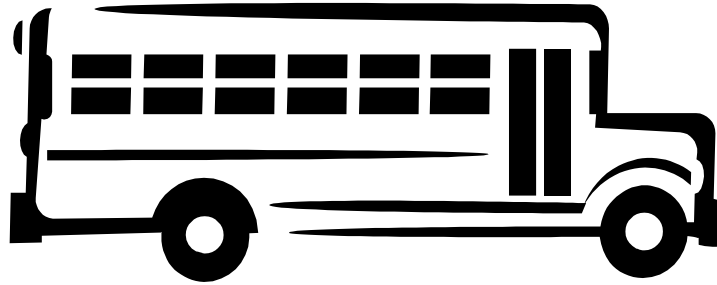


JELC BUS DIRECTIONS

BUS _____

Date Bus Service to Begin _____

JELC Teacher _____



Date: _____

Student's Name: _____

If your child will not ride a bus, please check here _____

Pick up at: Home _____ Babysitters _____ Daycare _____ Other _____

Pick up Address: _____

Specific Directions, if Rural Route _____

Deliver to: Home _____ Babysitters _____ Daycare _____ Other _____

Deliver to Address: _____

Specific Directions, if Rural Route _____

Parent's Signature: _____

Parent's Phone _____ **Babysitter's Phone** _____

Daycare Phone _____ **Other Phone** _____