## **Ogden Community School District** Transportation Registration

**Please complete this form even if you do not wish to receive transportation services.** All students at some time will ride a bus to an activity/field trip.

**Please make sure information is current. Return to your child's attendance center.** It is your responsibility to return this form ASAP. Incomplete and/or forms not returned will result in denial of transportation services.

Student Name:		
Grade:		
Gender:		
Parent/Guardian Name:		
Home Address:	City:	
Home Phone:	State:	Zip:
Cell Phone:		
Child Care Provider Name:		
Address:	City:	
Phone:	State:	Zip:
Emergency Contact Name:		
Phone:		
Your child's transportation eligibility is determin	ad by your home ad	droce
Transportation will be determined by home address		
Transportation will be provided in town between sch		in the country.
Transportation will be provided in town between set	C	
Do you need school transportation? Yes (If no, skip to the signature area located at the bottom of letter)		
	the bottom of letter)	
In-town transportation/shuttles from:		
m-town transportation/shuttles iron.		
Elementary to OMS/OHS	OMS/OHS to Elemen	tary
Transportation to or from a childcare provider will be		
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	e determined on an as	needed basis. You must
have the address in "Child Care Address" above.	e determined on an as	needed basis. You must
have the address in "Child Care Address" above. If you have questions regarding transportation, please cor	ntact Denny Good at 515	
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