

Dear Parents,

Please fill out all information below and return to Carousel so that we can properly process your child's transportation.

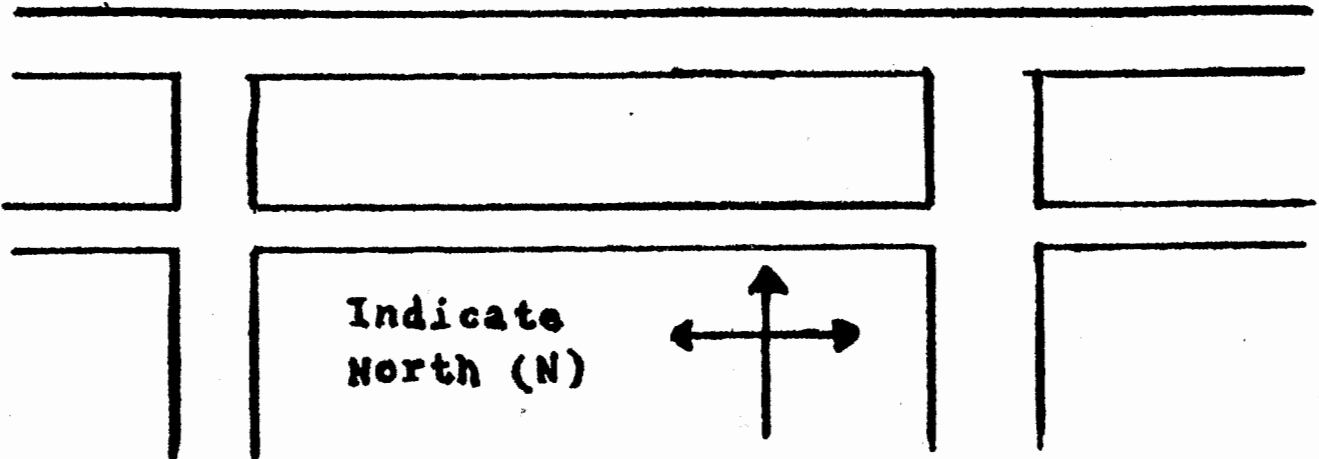
Child's Name _____ Session _____

Pick-up Address _____ Phone _____ Persons Name _____

Drop-off Address _____ Phone _____ Persons Name _____

The house is located between what two cross streets?
_____ and _____

Please indicate on map below house (X) and which side of the street it is located on.



Person/persons who might take child off the bus?

Any additional information that may be helpful?

House color _____

Landmarks _____

Thanking you in advance
for your cooperation