



EASTERN CHRISTIAN SCHOOL

TRANSPORTATION REQUEST FORM 2017-2018

Forward your request to: judybruinooge@easternchristian.org

Please complete and return this form **IF YOU DESIRE EC BUSING**.
BUS ROUTES CLOSE ON 7/31/17. Bus requests made after that date will be honored
and assigned to the nearest bus stop along an established route.

Parent Name:	Home Phone:
Address: City: Zip Code:	Email:

Student #1 Name:	Grade Entering:
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Please select from the following options:

<p>MORNING (AM) <input type="checkbox"/> No A.M. Service</p> <p><input type="checkbox"/> Full Service From the nearest corner or community stop to school campus</p> <p><input type="checkbox"/> Intercampus Shuttle – check a campus 7:45 a.m. Parent Drop-off: <input type="checkbox"/> ES <input type="checkbox"/> MS <input type="checkbox"/> HS</p>	<p>AFTERNOON (PM) <input type="checkbox"/> No P.M. Service</p> <p><input type="checkbox"/> Full Service From school campus to the nearest corner or community stop</p> <p><input type="checkbox"/> Intercampus Shuttle – check a campus 3:15 p.m. Parent Pick-up: <input type="checkbox"/> ES <input type="checkbox"/> MS <input type="checkbox"/> HS</p>
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Student #2 Name:	Grade Entering:
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Please select from the following options:






<p>MORNING (AM) <input type="checkbox"/> No A.M. Service</p> <p><input type="checkbox"/> Full Service From the nearest corner or community stop to school campus</p> <p><input type="checkbox"/> Intercampus Shuttle – check a campus 7:45 a.m. Parent Drop-off: <input type="checkbox"/> ES <input type="checkbox"/> MS <input type="checkbox"/> HS</p>	<p>AFTERNOON (PM) <input type="checkbox"/> No P.M. Service</p> <p><input type="checkbox"/> Full Service From school campus to the nearest corner or community stop</p> <p><input type="checkbox"/> Intercampus Shuttle – check a campus 3:15 p.m. Parent Pick-up: <input type="checkbox"/> ES <input type="checkbox"/> MS <input type="checkbox"/> HS</p>
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Student #3 Name:	Grade Entering:
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Please select from the following options:

<p>MORNING (AM) <input type="checkbox"/> No A.M. Service</p> <p><input type="checkbox"/> Full Service From the nearest corner or community stop to school campus</p> <p><input type="checkbox"/> Intercampus Shuttle – check a campus 7:45 a.m. Parent Drop-off: <input type="checkbox"/> ES <input type="checkbox"/> MS <input type="checkbox"/> HS</p>	<p>AFTERNOON (PM) <input type="checkbox"/> No P.M. Service</p> <p><input type="checkbox"/> Full Service From school campus to the nearest corner or community stop</p> <p><input type="checkbox"/> Intercampus Shuttle – check a campus 3:15 p.m. Parent Pick-up: <input type="checkbox"/> ES <input type="checkbox"/> MS <input type="checkbox"/> HS</p>
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PLEASE FILL IN COST CALCULATION - Transportation charges per student will be reflected in your Smart Tuition billing. Contact the Business Office for billing questions or email Geraldine directly at: Geraldinegallagher@easternchristian.org

 Full Service Bus Route Transportation – two ways	\$ 1,750.00 x _____ Students	\$ _____
 Full Service Bus Route Transportation – one way	\$ 1,125.00 x _____ Students	\$ _____
 Inter-campus Shuttle Transportation – two ways	\$ 1,000.00 x _____ Students	\$ _____
 Inter-campus Shuttle Transportation – one way	\$ 500.00 x _____ Students	\$ _____
 One way Full Bus Route plus one way Inter-campus Shuttle	\$ 1,375.00 x _____ Students	\$ _____
There is <u>NO</u> per diem busing available.		
TOTAL		\$ _____

SPECIAL REQUESTS

I am requesting afternoon transportation to a different location than my morning pick-up, if possible. I understand that generally morning and afternoon stops are in the same place and special requests will be handled only when feasible with existing routes.

Different address request: _____

Reason for Request: (job, baby-sitter, Grandma's, etc.)

You will be allowed a one time change in your transportation options at the semester break per Business Office

Email your questions to judybruinooge@easternchristian.org
Or phone 973-310-0406