

HARRISBURG SCHOOL DISTRICT
NON-PUBLIC PA-8

ENROLLMENT REGISTRATION FORM FOR TRANSPORTATION

INFORMATIONAL

STUDENT NAME _____
LAST FIRST MIDDLE

ADDRESS _____

PARENT NAME _____
LAST FIRST

STUDENT'S BIRTHDATE _____
MONTH DAY YEAR

RACIAL CODE _____

HOME PHONE _____ CELL PHONE _____

SCHOOL NUMBER/NAME () _____
SCHOOL NAME

GRADE _____

ENTRY CODE _____ DATE OF ENTRY _____

- AM ONLY TRANSPORTATION PM ONLY TRANSPORTATION
 BOTH AM/PM TRANSPORTATION NO TRANSPORTATION NEEDED

FORM COMPLETED BY _____ DATE _____

FOR TRANSPORTATION USE ONLY:

BUS NUMBER _____

STOP LOCATION _____

PICK UP TIME _____ AM

INSTRUCTIONS:

1. Use this form ALL STUDENTS
2. Complete ONLY the INFORMATIONAL Section. All information should be completed.
3. School Name - Fill in School Name - Do not write in brackets

FORWARD DIRECTLY TO:

HARRISBURG SCHOOL DISTRICT
TRANSPORTATION
2101 N FRONT ST
HARRISBURG, PA 17110
OR
FAX TO: (717) 703-4105