

**Steelton-Highspire School District**  
**NON-PUBLIC PA-8**  
**ENROLLMENT REGISTRATION FOR TRANSPORTATION**

## INFORMATIONAL

STUDENT NAME \_\_\_\_\_

LAST	FIRST	MIDDLE
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ADDRESS \_\_\_\_\_

PARENT NAME \_\_\_\_\_

## LAST FIRST

RACE (please circle)  WHITE  BLACK  ASIA  HISPANIC  INDIAN/HAWAIIAN  MULTIRACIAL

STUDENT'S BIRTHDAY \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ GRADE \_\_\_\_\_

MONTH            DAY            YEAR

MONTH                    DAY                    YEAR

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

SCHOOL NAME \_\_\_\_\_ PHONE \_\_\_\_\_

DATE OF ENTRY \_\_\_\_\_

AM ONLY TRANSPORTATION       PM ONLY TRANSPORTATION

BOTH AM/PM TRANSPORTATION       NO TRANSPORTATION NEEDED

BOTH AM/PM TRANSPORTATION       NO TRANSPORTATION NEEDED

FORM COMPLETED BY \_\_\_\_\_ DATE \_\_\_\_\_

FOR TRANSPORTATION USE ONLY

**FOR TRANSPORTATION USE ONLY**

BUS NUMBER \_\_\_\_\_

STOP LOCATION \_\_\_\_\_

PICK UP TIME \_\_\_\_\_

FORWARD DIRECTLY TO

## Steelton-Highspire School District

## TRANSPORTATION

250 REYNDERS AVENUE

STEELTON, PA 17113

FAX (717)704-3808