Berlin Area School District 2025-2026 Student Transportation Contract

Please use a separate form for each child anc return to your child's school. Only students with a transportation contract on file are allowed to ride a bus.

Student Na	ame:				
Grade:		School:			
Home Add	lress:				
Parent/Guardian Name:				Cell Phone:	
				Work Phone:	
Parent/Guardian Name:				Cell Phone:	
				Work Phone:	
Please select up to two (2) pick up and drop off locations for your child. This schedule MUST BE A SET SCHEDULE EACH WEEK. Any deviation to this schedule becomes the parent's responsibility to transport. Changes may take up to three (3) school days to process. You will be notified when changes have been processed.					
Day	Day AM Pickup Location			PM Drop Off Location	
Mon					
Tue					
Wed					
Thu					
Fri					
	☐ My child c	loes not need AM bus transpor	rtation	☐ My child do	es not need PM bus transportation
By complet	-	Transportation Contract, both t hin the Transportation Handbo	-		are agreeing to the rules and policies the BASD website.
Parent Signature					Date
Office Use Only					
Date Received:/			Schoo	ol Notified:	
Date Processed:			Paren	Parent Notified:/	
☐ 4K/EC AM		☐ 4K/EC PM	Special Needs		Wheelchair