

BEFORE SCHOOL PICK

AFTER SCHOOL PICK UP

RUSH HOUR KIDS TRANSPORTATION APPLICATION

Child's First Name: _____ Last Name: _____

Date of Birth: _____ Age: _____ Gender: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Father's Name _____ Cell: _____ Work Ph: _____

Mother's Name: _____ Cell: _____ Work Ph: _____

EMERGENCY CONTACT

NAME:

PHONE NUMBERS

If we are transporting your child or children to and from school, please complete the section below.

School Name: _____ School Phone # _____

Grade: _____ Teacher's Name: _____

Parent's Signature _____ Date: _____

PLEASE INITIAL ALL AREAS: CHILD'S NAME _____

() Weekly Fees Payments must be paid on Friday, prior to service being rendered. Service will **NOT** be rendered on Monday without payment or payment arrangement been made.

() Monthly or bi-weekly payments must be paid on schedule or service will be **TERMINATED**

() Fees are not PRORATED, payment are due regardless if child attends.

() Fees for Christmas Break is \$25.00 weekly rate per week, first payment is due before Christmas break to maintain your child's space.

() Fees for Spring break is ½ weekly rate, due before Spring break to maintain your child's space

() Child or Children should be ready to board the Van upon arrival, Failure to have child ready upon Van arrival will result into your child missing the Van. We do offer a Courtesy phone call upon Request by the Parent(s). **WE DO NOT WAIT.**

() Scheduled time of pick up and drop off can change due to enrollments and withdrawals. Notice of time change will be given verbally in advance.

() Rush Hour Kids Transportation, Inc. reserve the right to cancel service due to conflicts, lack of area participation, or Child Behavior Problem.

() I have received a copy of the policy and Procedures and understand m obligations. If at any time I am unable to fulfill my obligation, I will notify Rush Hour Kids Transportation in writing.

Authorized Signature: _____ Date: _____