



Sweet Apple Elementary Transportation Change Form

Please print LEGIBLY!

Student's Name: _____ (Teacher _____)

He/She will be going home with _____ (Teacher _____)

BUSES MAY NOT BE USED AS A MEANS OF TRANSPORTING FOR AFTERNOON PLAY DATES!

Will be a walker _____ Will be carpool _____ Will be riding bus # _____

Parent/Guardian Signature _____

Phone # _____ (please include a number where you can be reached during school hours)



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