



BISHOP SCHOOL BUS APPLICATION FORM

Bus Rates are as Follows: One Student Yearly = \$270.00
 Family Rate Maximum Yearly = \$370.00

Please Print Clearly and List Each Student and Grade Separately

Bus Stops Will Be Selected By Home Location and Proximity to Nearest Stop

GRADE	STUDENT LAST NAME	STUDENT 1ST NAME	HOME ADDRESS	EMERGENCY PHONE NUMBERS

After School Transport is Also Offered to Families Residing outside The Bishop Busing District on a Space Available and First Come First Served Basis.

AFTER SCHOOL Y / N	PLEASE NOTE: ACC. OR B&G CLUB	DAYS ATTENDING	

CHECK AMOUNT TOTAL	DATE	NOTES

Applications and Checks Need to be Submitted No Later Than the end of the first Week of August ~ Copies of This Application as Well as Bus Schedules and Route Map are Available online at www.arlington.k12.ma.us ~ Click on Transportation Link

Please submit this form with your check made out to: **Arlington Public Schools** to
 Arlington High School, Business Office, 869 Mass Ave., Arlington, MA 02476

Bus Passes Will Be Issued by Mail After Applications Have been Accepted