



GALT HIGH SCHOOL DISTRICT-TRANSPORTATION DEPARTMENT
SCHOOL BUS PASS APPLICATION
 2011-2012 SCHOOL YEAR

Do not use

Please complete all steps of the application and return to the Galt High School District Office, 12945 Marengo Rd, Galt, CA-95632
 Questions? Call us at 745-3061

PASS MUST BE DISPLAYED TO BOARD THE BUS

Students attending school through an Intradistrict/Interdistrict Transfer are not eligible for transportation.

Family Information			FOR OFFICE USE ONLY	
Parent /Guardian Name:			PROCESSED DATE _____ Fee _____	
Home Phone	Cell Phone	Work Phone	CHK AMT. _____ CC AMT. _____ CASH _____	
Address		Apt#	CHK# _____ CC AUTH# _____	
			ACCEPTED BY _____	
			FAX _____ MAIL _____ WALK IN _____ EMAIL _____	
City/Zip		Email (optional)		

Student(s) Information All Student(s) Information must be completed. Students will be assigned a stop, relative to home address, if one is not listed below.

NAME	ID	SCHOOL/GRADE	BUS STOP



Type of Service/Fees <table> <tr> <td>Annual Service Round Trip</td> <td style="text-align: right;"><i>Per Student</i> \$200 <input type="checkbox"/></td> </tr> <tr> <td>Semester Service Round Trip</td> <td style="text-align: right;">\$105 <input type="checkbox"/></td> </tr> <tr> <td>One Way Punch Cards (20 punch #'s per card)</td> <td style="text-align: right;">\$35 <input type="checkbox"/></td> </tr> </table>	Annual Service Round Trip	<i>Per Student</i> \$200 <input type="checkbox"/>	Semester Service Round Trip	\$105 <input type="checkbox"/>	One Way Punch Cards (20 punch #'s per card)	\$35 <input type="checkbox"/>	<p style="text-align: center;">Circle Payment type: Check, Cash or Credit Card</p> <p style="text-align: center;">Students eligible for free transportation due to (check the applicable box)</p> <p>Homeless <input type="checkbox"/> Enrolled in Free/Reduced Lunch Program <input type="checkbox"/></p> <p>Low Income <input type="checkbox"/> Foster Status <input type="checkbox"/> Special Education <input type="checkbox"/></p> <p>All documentation must be included with this application to qualify</p> <p>Complete Back Side of the Application if checked above</p>
	Annual Service Round Trip	<i>Per Student</i> \$200 <input type="checkbox"/>					
	Semester Service Round Trip	\$105 <input type="checkbox"/>					
One Way Punch Cards (20 punch #'s per card)	\$35 <input type="checkbox"/>						

By signing below I confirm I have read and will adhere to the GJUHS District transportation regulations concerning the transportation of students and the rules that are enforced on District buses for the safety of students. I also verify that the information contained in this document is true and correct. I understand falsification of information is cause for the revocation of bus service without refund. If I am paying by credit card, my signature also authorizes charges to the account indicated above. I understand that use of the credit card is subject to the terms and conditions of the issuing bank. I further understand the bus pass must be displayed when boarding the bus and a \$15.00 PROCESSING CHARGE will be assessed for replacement passes for any reason. Video surveillance cameras are used on many district buses. Boarding the bus is consent to audio and video recording.

Signature of Parent/Guardian _____ **Date** _____

REPLACEMENT PASSES Request Date _____ Name(s) of Student _____ Amt. Paid _____ Check/Auth# _____ Pmt Made By _____	Request Date _____ Name(s) of Student _____ Amt. Paid _____ Check/Auth# _____ Pmt Made By _____	Request Date _____ Name(s) of Student _____ Amt. Paid _____ Check/Auth# _____ Pmt Made By _____
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