

Bus # _____

Route # _____

School Year _____ - _____

Hutto Independent School District

SCHOOL BUS RIDER'S CONTRACT

(This Contract will be kept by the Bus Driver.)

I, THE UNDERSIGNED, CERTIFY THAT I HAVE READ, UNDERSTAND, AND REVIEWED THE POLICIES AND PROCEDURES IN THE BUS RIDER'S HANDBOOK WITH MY STUDENTS LISTED BELOW. WE AGREE TO ABIDE BY ALL OF THOSE RULES.

NAME OF PARENT / GUARDIAN (PRINT)

SIGNATURE OF PARENT / GUARDIAN

PLEASE PRINT STUDENTS NAMES (LIST ADDITIONAL STUDENTS ON THE BACK OF THIS CARD)

1) _____

GRADE: _____ CAMPUS: _____

2) _____

GRADE: _____ CAMPUS: _____

3) _____

GRADE: _____ CAMPUS: _____

HOME ADDRESS:

*CIRCLE PREFERRED METHOD OF CONTACT – PHONE TEXT EMAIL

STREET

CITY, STATE

ZIP

HOME PHONE

CELL PHONE: _____ WORK PHONE: _____ EMAIL: _____

AUTHORIZED ADULTS TO MEET STUDENTS AT STOP

NAME
PHONE: _____

NAME
PHONE: _____

NAME
PHONE: _____