

VISTA TRANSPORTATION CONTRACT 2018/19

2455 Visitation Drive, Mendota Heights, MN 55120

STUDENT NAME _____
Last Name First Name

HOME ADDRESS _____ 2018-19 GRADE _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL PHONE _____
Father Mother

EMAIL _____

SCHOOL DISTRICT _____ DISTRICT # _____ BIRTHDATE _____

The above student attends: **Saint Thomas Academy** _____ **Visitation School** _____

BUS RIDER DEPOSIT

Cost is per student. Bus fee plus your district reimbursement, where applicable.

Bus routes are determined by the families who send a deposit by April 30, 2018

Bus route information will be sent to families in August by email.

I have enclosed a deposit of \$400 per rider and **I agree to pay the balance by September 30, 2018.** The deposit is non-refundable after July 31, 2018. In addition to the fee, I will remit my district reimbursement check to the transportation office.

Parent or Guardian Signature _____ Date _____

THE FOLLOWING INFORMATION MUST BE SIGNED BY ALL STUDENT RIDERS.

I understand that while riding the bus, my conduct will be such that I will not distract the driver, be loud or rude, use vulgar language, use alcohol, tobacco (chew or smoke), destroy property, or behave in a manner unbecoming of a Visitation or Saint Thomas Academy student. I also understand that any violations pertaining to behavior will jeopardize my commuting privileges.

Student signature _____ Date _____

PLEASE RETURN SIGNED CONTRACT AND \$400 DEPOSIT TO:

VISTA Transportation
2455 Visitation Drive
Mendota Hts., MN 55120

Mary Jo O'Halloran, 651-683-1770
mohalloran@cadets.com mohallor@vischool.org