Rainbow Route Application

If your child is not pla	aced on the	bus, will th	ney still be	able to att	end preschoo	ol?	YES	NO	
Child's First Name				_	Child's Last	Name			
What type of transpo	ortation are	you needir	ng? A. Pick	up only (to	school) B. D	rop off o	nly (from schoo	l) C. Both	
Pick Up Address:					_				
Drop Off Address:					_				
If either of the above	are a dayca	ire, please	provide the	eir name a	nd phone nu	mber be	low:		
Preschool:	Is the child			registered? YES			NO		
Class Start:	_Class End:		-						
Days Needed:	Mon	Tues	Wed	Thurs	Fri		Age Sept 1:		
Parent's First and Las	t Name								
Home Address									
Phone Number				-	Alt. Phone	Number			
Email Address					_				
Emergency Contact 1 Name					Emergency Contact 1 Phone #				
Relationship to child	:				_				
Emergency Contact 2 Name					Emergency Contact 2 Phone #				
Relationship to child	:				_				
Does the child have a	any allergies	? If so, ple	ase list						







Rainbow Route Terms and Conditions

- -I am aware that my child is not guaranteed a spot on the Rainbow Route (you will be notified by the United Way if your child is able to receive transportation services)
- -All information provided on this application is correct, and if <u>anything</u> shall change, I will notify the United Way of Mower County immediately
- -I consent to Disclosure, Mutual Release, and Sharing of Private Information among the partners within the Rainbow Route Collaborative (United Way of Mower County, SMART Transportation, The Parenting Resource Center, and my child's school).
- -I consent, on behalf of my child, to the United Way of Mower County and/or a United Way of Mower County approved media representative use of my child's voice, photograph, video or likeliness in United Way's campaign materials, internet, advertisements and other marketing and promotional materials. It is further understood that I consent, on behalf of my child, to the above without expecting payment or other reimbursement, and I release United Way of Mower County and its employees from any and all liabilities which may arise from the use of such material. It is understood that my child's name/identity may also be used for these purposes.
- -I am aware that if there are any behavioral issues, my child may be removed from the bus
- -I am aware that if my child is placed on the Rainbow Route, it is my responsibility to notify SMART Transportation (855-
- -I am aware that all Rainbow Route staff are mandated reporters

By signing below, you acknowledge that you agree to the Terms and Conditions

Parent Name	
Parent Signature	
Date	