

Fox Valley Lutheran High School (Appleton)

2025/2026 BUS FORM

Return this form to amandavanderwielen@golamers.com by 7/30/25

Any questions, you may call 920-832-8800 ext. 10926

If your student(s) **will** ride the bus for the 2025-2026 school year, please fill out the entire form. Use the grade that your student(s) will be in for the 2025-2026 school year.

Student first & last name: _____ MI: _____ Grade: _____

Student first & last name: _____ MI: _____ Grade: _____

Student first & last name: _____ MI: _____ Grade: _____

Student first & last name: _____ MI: _____ Grade: _____

Home Address:

Home Phone Number:

Request transportation for: **AM** or **PM** or **Both** (circle one)

Parent 1 Contact Information:

First & Last Name:

Phone Number: _____ Email: _____

Parent 2 Contact Information:

First & Last Name:

Phone Number: _____ Email: _____

Please note: Parent/Guardian cell phone numbers and email addresses help us effectively contact you if/when there are delays (inclement weather, accidents, etc.) or changes in routing information. Having a middle initial helps us differentiate between students in our database.