



Private Bus Agreement 2025 - 2026

We understand you may want to use a private bus service to transport your daughter to/from St. Mary Academy - Bay View.

Please **choose one** morning pick-up time:

First Pick-up: 6:45 AM

Located at **Showcase Cinemas**, 1200 Quaker Lane, Warwick

Second Pick-up: 7:00 AM

Located at **Kohls**, 650 Bald Hill Road, Warwick

● **1st Afternoon Drop-off: ≈ 3:00 PM**

Located at **Kohls**, 650 Bald Hill Road, Warwick

● **2nd Afternoon Drop-off: ≈ 3:20 PM**

Located at **Showcase Cinemas**, 1200 Quaker Lane, Warwick

You must arrive on time for your respective pick-up so the bus can arrive at Bay View on time.

Please select the service you intend to use for the **2025-2026** Academic year below.

This agreement is binding for the whole school year, and the cost reflects use per student.

_____ I am contracting for the **AM service only**. This one-way transportation for the whole school year is **\$1,200.00**. Please return the completed form and a payment of **\$600.00** no later than **Monday, August 18, 2025**. The remaining balance will be due no later than **Friday, September 26, 2025**.

_____ I am contracting for the **PM service only**. This one-way transportation for the whole school year is **\$1,200.00**. Please return the completed form and a payment of **\$600.00** no later than **Monday, August 18, 2025**. The remaining balance will be due no later than **Friday, September 26, 2025**.

_____ I am contracting for the **AM and PM service**. This two-way transportation for the whole school year is **\$2,400.00**. Please return the completed form and a

payment of **\$1,200.00** no later than **Monday, August 18, 2025**. The remaining balance will be due no later than **Friday, September 26, 2025**.

I enter into this contract knowing that this payment is in effect even if my child(ren) does not ride the bus for an extended time due to illness, participation in extracurricular activities, or any other reason. Although the contract is payable in two parts, **I am obligated to pay for the whole year.** Please note that a 2% surcharge fee will be added to your total if you pay electronically.

I am fully aware that my child(ren) is/are subject to all of the published rules and regulations governing the conduct and safety of the student body.

Furthermore, I am aware that at any time, at the discretion of the Principal of St. Mary Academy - Bay View, the student may have her right to ride the bus revoked because of violations of rules, regulations, or guidelines.

If you have any questions or concerns, please email finance@bayviewacademy.org.

Also, please join the private bussing REMIND class by texting @bvabus to 81010. This will provide you with important information and updates as needed, or you can message the driver directly.

Service will begin on the first full school day — **Wednesday, August 27, 2025**.

Parent or Legal Guardian: _____
Print Name

Parent or Legal Guardian: _____
Signature Date

Parent Contact Number: _____

Parent Email Address: _____

Student Name: _____ **Grade:** _____

Your daughter's name will be added to the transportation list, and the bus driver will check on her daily. Please review student behavior guidelines in the Bay View Handbook.

Bus pick-up times are subject to change at the bus company's discretion.

Return this form along with payment to:

St. Mary Academy - Bay View
Attn: Private Bussing
3070 Pawtucket Avenue
Riverside, RI 02915

Please make checks payable to **St. Mary Academy - Bay View** and note **Private Bussing** in the memo line.

The cost of transportation should you enter into the contract after the following dates:

	AM Service only	PM Service only	AM & PM Service
Enter after 10/25	\$1,000.00	\$1,000.00	\$2,000.00
Enter after 1/25	\$700.00	\$700.00	\$1,400.00
Enter after 3/28	\$400.00	\$400.00	\$800.00

Office Use Only

Date Received: _____

Payment: _____

Balance Due: _____