

**2025-2026 Pendleton Preschool Transportation Form** Date \_\_\_\_\_

**Child's Name:** First \_\_\_\_\_ Last: \_\_\_\_\_ DOB \_\_\_\_\_

**Parent Contact:** First \_\_\_\_\_ Last: \_\_\_\_\_ PH: \_\_\_\_\_

**Parent Contact:** First \_\_\_\_\_ Last: \_\_\_\_\_ PH: \_\_\_\_\_

**COMPLETE TRANSPORTATION SECTIONS FOR BOTH AM AND PM**

\_\_\_\_\_ **My child DOES NOT need AM bus transportation.**

**-OR**

**Complete only one address**

\_\_\_\_\_ **PLEASE PICK MY CHILD UP AT ONE OF THE FOLLOWING ADDRESSES:**

\_\_\_\_\_ **OUR HOME ADDRESS:** \_\_\_\_\_ City \_\_\_\_\_

Responsible Adult: \_\_\_\_\_ Relationship: \_\_\_\_\_ PH: \_\_\_\_\_

**-OR-**

\_\_\_\_\_ **THIS ADDRESS:** \_\_\_\_\_ City \_\_\_\_\_

Responsible Adult: \_\_\_\_\_ Relationship: \_\_\_\_\_ PH: \_\_\_\_\_

\_\_\_\_\_ **My child DOES NOT need PM bus transportation.**

**-OR**

**Complete only one address**

\_\_\_\_\_ **PLEASE DROP MY CHILD OFF AT ONE OF THE FOLLOWING ADDRESSES:**

\_\_\_\_\_ **OUR HOME ADDRESS:** \_\_\_\_\_ City \_\_\_\_\_

Responsible Adult: \_\_\_\_\_ Relationship: \_\_\_\_\_ PH: \_\_\_\_\_

**-OR-**

\_\_\_\_\_ **THIS ADDRESS:** \_\_\_\_\_ City \_\_\_\_\_

Responsible Adult: \_\_\_\_\_ Relationship: \_\_\_\_\_ PH: \_\_\_\_\_

---

**OFFICE USE ONLY:**

\_\_\_ **NES** \_\_\_ **SES** \_\_\_ **M/Tue** \_\_\_ **W/TH** **BUS IN:** \_\_\_\_\_ **BUS OUT:** \_\_\_\_\_