

St. John School  
5 St. John Square  
Middletown, CT 06457

BUS INFORMATION

Change of Address \_\_\_\_\_

New Student \_\_\_\_\_

School Year \_\_\_\_\_

Student Name \_\_\_\_\_

Address \_\_\_\_\_

Grade \_\_\_\_\_

Bus# \_\_\_\_\_

I will use bus transportation everyday A.M. & P.M. \_\_\_\_\_

I will transport my child A.M. & P.M. \_\_\_\_\_

I will transport my child A.M. **ONLY** \_\_\_\_\_

I will transport my child P.M. **ONLY** \_\_\_\_\_