

2010 | 2011

SAN LORENZO VALLEY UNIFIED SCHOOL DISTRICT
BUS PASS AND TICKET ORDER FORM
336-2223
336-2525 FAX

Pass #

Five horizontal lines for entering the pass number.

PARENT / GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

RESIDENCE ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

AFTER SCHOOL DAY CARE PHONE # \_\_\_\_\_ NAME \_\_\_\_\_

BUS STOP \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_ PASS TYPE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_ PASS TYPE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_ PASS TYPE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_ PASS TYPE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_ PASS TYPE \_\_\_\_\_

NOTE: When ordering different types of passes for two or more students, please specify which student is to get which type of pass.

# OF PASSES REQUESTED:

Amount

ROUND-TRIP 1st STUDENT @ \$220 per year \_\_\_\_\_

ROUND-TRIP 1st & 2nd STUDENT @ \$418 per year \_\_\_\_\_

ROUND-TRIP 1st, 2nd & 3rd STUDENT @ \$627 per year \_\_\_\_\_

ROUND-TRIP EA ADD'L STUDENT @ \$160 per year \_\_\_\_\_

ROUND-TRIP 1st STUDENT @ \$116 per semester \_\_\_\_\_

ROUND-TRIP 1st & 2nd STUDENT @ \$220 per semester \_\_\_\_\_

ROUND-TRIP 1st, 2nd & 3rd STUDENT @ \$331 per semester \_\_\_\_\_

ROUND-TRIP EA ADD'L STUDENT @ \$80 per semester \_\_\_\_\_

(Circle One)

ONE-WAY 1st STUDENT @ \$116 per year \_\_\_\_\_ TO SCHOOL / TAKE HOME

ONE-WAY 1st & 2nd STUDENT @ \$220 per year \_\_\_\_\_ TO SCHOOL / TAKE HOME

ONE-WAY 1st, 2nd & 3rd STUDENT @ \$331 per year \_\_\_\_\_ TO SCHOOL / TAKE HOME

ONE-WAY 1st STUDENT @ \$58 per semester \_\_\_\_\_ TO SCHOOL / TAKE HOME

ONE-WAY 1st & 2nd STUDENT @ \$110 per semester \_\_\_\_\_ TO SCHOOL / TAKE HOME

ONE-WAY 1st, 2nd & 3rd STUDENT @ \$165 per semester \_\_\_\_\_ TO SCHOOL / TAKE HOME

# OF TICKET BOOKS REQUESTED

BOOKS OF 20 TICKETS \$20 \_\_\_\_\_

Total \$ \_\_\_\_\_

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PLEASE MAKE CHECK PAYABLE TO: SLV TRANS DEPT.
(Returned checks will be subject to a \$35 service charge)

MAIL TO: SLVUSD TRANSPORTATION DEPARTMENT
325 MARION AVE
BEN LOMOND, CA 95005
OR

COME BY: 315 MARION AVE
BEN LOMOND
ABOVE SLVUSD DISTRICT OFFICE
(FORMERLY QUAIL HOLLOW SCHOOL)

VISA / MASTERCARD / DISCOVER CARD

ACCT # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ CVS ON BACK \_\_\_\_\_

SIGNATURE \_\_\_\_\_