



WHITEFIELD ACADEMY

A Christ-Centered Preparatory School

SHUTTLE SERVICE REGISTRATION FORM 2015-2016

Options:

Occasional rider _____ (passes **MUST** be purchased in advance)

Full-time _____ (AM/PM rider 5 days per week)

Part-time _____ (AM or PM rider 5 days per week)

Payment in full: Ck. # _____

I have already included this fee in my FACTS tuition payment plan: _____

Please add this fee to my FACTS tuition payment plan: _____

Please choose location: HBC East Campus _____ or Tyler Center _____

Today's Date: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student's Home Address: _____

Parent Contact Information:

Father:

Mother:

Name

Name

Address

Address

Home Phone

Home Phone

Work Phone

Work Phone

Cell Phone

Cell Phone

Additional Emergency Contact:

Name Address Phone

Name Address Phone