

BENSALEM TOWNSHIP SCHOOL DISTRICT

RICHARD G. BERG TRANSPORTATION CENTER
1440 BYBERRY ROAD BENSALEM, PA 19020

PHONE: 215-750-2800 X 4400
FAX 215-244-2709

Form PT-2

School: _____

Please check one:

New Student

Deletion

Student's Name: _____ Gender: _____

Address: _____
(Please include street name, number and/or apartment name, number)

(City, State & Zip)

Telephone: _____ Year of Graduation: _____ Grade: _____

(from 12th grade)

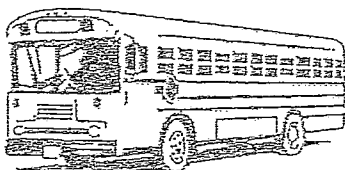
Emergency#: _____ (important, please complete)

Date of Birth: _____ Social Security # or Student ID: _____

Present Bus Stop: _____

Medical Information: _____
(allergies, asthma, seizures, etc. important information for safe transportation)

Note: Please complete all categories



A Community Committed To Excellence, Innovation
And Quality Education For All