



PHOENIXVILLE AREA SCHOOL DISTRICT

DISTRICT ADMINISTRATION OFFICE
386 CITY LINE AVENUE
PHOENIXVILLE, PA 19460
484-927-5000
FAX 610-933-3189
BUSINESS OFFICE FAX
610-933-3707

TRANSPORTATION REGISTRATION FORM

School Year _____ Date _____

Last Name _____ First Name _____ Middle Name _____

Date of Birth ____/____/____ Gender (Circle): Male Female

Home Address: _____ City: _____ State: _____ Zip: _____

Mailing Address _____ Home Phone Number: _____

BUS NEEDS (Circle): Inbound(AM) Outbound(PM) Parent Transportation (Circle): Inbound(AM) Outbound(PM)

LOCATION (Circle): To or From Home or To or From Daycare (name of daycare _____)

School Attending _____

GRADE: (Circle One) Early Intervention, Kindergarten, 01, 02, 03, 04, 05, 06, 07, 08, 09, 10, 11, 12

Mother: (Dr. Mrs. Ms.) _____ Father: (Dr. Mr.) _____
Guardian: (Dr. Mrs. Ms.) _____ Guardian: (Dr. Mr.) _____
Birth Date: ____/____/____ Birth Date: ____/____/____
Marital Status: Married Single Divorced Widowed Marital Status: Married Single Divorced Widowed

Employer: _____ Employer: _____
Occupation _____ Occupation _____
Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____
Home Phone: _____ Home Phone: _____

Email _____ Email _____

Address: *enter only if address differs from student Address: *enter only if address differs from student

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

Allergies/Medical Issues/Concerns related to transportation _____

Emergency Contact (in case parents cannot be reached):

Name _____ Phone _____ Relationship _____

Please complete and return this form, with proof of residency (i.e. PECO bill, Rent Receipt) to:
nattles@pasd.com or Fax 610-933-3189

Form must be completed regardless of transportation needs.

Phoenixville Area School District is an equal opportunity education institution and will not discriminate on the basis of race, color, religious affiliation, national origin, sex, age, marital status or non-relevant disabilities in its activities, programs or employment practices as required by Title VI, Title IX and Section 504. The district's commitment to non-discrimination extends to students, employees, prospective employees and the community. For information regarding civil rights or grievance procedures or for information regarding services, activities and facilities that are accessible to and useable by disabled persons, contact the Director of Human Resources, Phoenixville Area School District, 386 City Line Avenue, Phoenixville, Pennsylvania 19460. 484-927-5000