

## Methacton School District - Transportation Registration Form

Student Information: School Attending: \_\_\_\_\_

School Year: \_\_\_\_\_ Entering Grade: \_\_\_\_\_ Entering Date: \_\_\_\_\_

Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
*last first middle*

Street Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Sex: male \_\_\_\_\_ female \_\_\_\_\_

Previous School Attended: \_\_\_\_\_

Parent/Guardian Information: Student Lives With: Both Parents: \_\_\_\_\_ Mother: \_\_\_\_\_ Father: \_\_\_\_\_ Guardian: \_\_\_\_\_

Type of Residence: House \_\_\_\_\_ Apartment \_\_\_\_\_ Mobile Home \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

*Complete and send to Methacton Transportation: 1003 Kriebel Mill Road, Norristown, PA 19403 or fax (610) 489-5024*

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City/State/Zip: \_\_\_\_\_ Sex: male \_\_\_\_\_ female \_\_\_\_\_

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Parent/Guardian Information: Student Lives With: Both Parents: \_\_\_\_\_ Mother: \_\_\_\_\_ Father: \_\_\_\_\_ Guardian: \_\_\_\_\_

Type of Residence: House \_\_\_\_\_ Apartment \_\_\_\_\_ Mobile Home \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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Parent/Guardian Signature: \_\_\_\_\_

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