

**TSD9 Transportation/Emergency Form**  
**Liberty / South Prairie**  
**(All information is strictly confidential)**

YEAR \_\_\_\_\_

Student Name:	
Grade: K    1    (Liberty) 2    3    (South Prairie)	Teacher:
Home Street Address:	Home Phone:
Mother/Guardian Name:	Father/Guardian Name:
Mother/Guardian Phone:	Father/Guardian Phone:
Mother/Guardian Work Phone:	Father/Guardian Work Phone:

**END OF THE DAY - Regular Transportation Schedule**

Monday	Picked Up by	Name : _____
	Bus Rt #	Address: _____
Tuesday	Picked Up by	Name : _____
	Bus Rt #	Address: _____
Wednesday	Picked Up by	Name : _____
	Bus Rt #	Address: _____
Thursday	Picked Up by	Name : _____
	Bus Rt #	Address: _____
Friday	Picked Up by	Name : _____
	Bus Rt #	Address: _____

**EMERGENCY RELEASE**

**ONLY AUTOMATED CALLS FROM THE DISTRICT WILL BE MADE. IF YOUR CHILD HAS NOT BEEN PICKED UP 10 MINUTES PRIOR TO THE BUSES LOADING, THEY WILL BE TRANSPORTED TO THE ADDRESS GIVEN BELOW.**

<b>Emergency or Early Release</b>	Bus Rt #	Name Address Phone
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**Emergency Pick Up Names & Phone Numbers**

- 1
- 2
- 3

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_