

By mail:
 Fort William First Nation Education
 90 Anemki Drive, Suite 200
 Fort William First Nation, Ontario
 P7J 1L3

or by fax: 807 623-5190

2017-2018

FORT WILLIAM FIRST NATION SCHOOL BUS REGISTRATION FORM

This information is required for administrative, safety issues, as well as planning purposes.

Questions or concerns email education@fwfn.com

Registration forms are mandatory to ride the FWFN school bus and must be completed by August 18, 2017.

Student #1 Information		Start Date:	
Legal First Name:		Legal Last Name:	
Preferred Name (if different from above)		Date of Birth:	
School:	Grade:	Band #: (If applicable)	
Medical Conditions: IS AN EPI-PEN REQUIRED FOR THIS STUDENT? YES [] NO []			
Will you require us to pick up your child/ren in morning: YES [] NO []		Will you require us to pick up your child/ren after school: YES [] NO []	
Address for pick up:		Address for drop off:	
Student #2 Information		Start Date:	
Legal First Name:		Legal Last Name:	
Preferred Name (if different from above)		Date of Birth:	
School:	Grade:	Band #: (If applicable)	
Medical Conditions: IS AN EPI-PEN REQUIRED FOR THIS STUDENT? YES [] NO []			
Address for pick up:		Transportation needed: YES [] NO []	Address for drop off: Transportation needed: YES [] NO []
Student #3 Information		Start Date:	
Legal First Name:		Legal Last Name:	
Preferred Name (if different from above)		Date of Birth:	
School:	Grade:	Band #: (If applicable)	
Medical Conditions: IS AN EPI-PEN REQUIRED FOR THIS STUDENT? YES [] NO []			
Address for pick up:		Transportation needed: YES [] NO []	Address for drop off: Transportation needed: YES [] NO []
Parent/Gaurdian Information		Relationship to Student: Mother [] Father [] Other []:	
First Name:	Last Name:	Home #	Cell #
Mailing address:			
<p>I give permission for my child/ren to participate in the FWFN Student Nutrition Program. This program will supply my child/ren with a school snack. Snack will consist of at least two of the following (dairy product, grain product, fruit product) Inform staff in writing if student has any allergies. YES [] NO []</p>			

Signature

Date

If you have more than 3 children who require bussing please use additional forms. All forms must be dated and signed.