

Christ the King School

A School in the Catholic Tradition since 1955



BUS SERVICE REGISTRATION FORM – 2024-2025

BUS SERVICE AT CHRIST THE KING SCHOOL

Bus service is available to all students of Christ the King School from Junior Kindergarten to Grade 8 who live in the Southeast end of the city (River Park South, Royalwood, Island Lakes, Sage Creek, Southdale, Windsor Park, and St. Vital). The bus starts pick-up at approx. 7:15am and leaves the school in the afternoon at 3:30pm. Once the registrations have been received, the bus driver will establish a route and you will be contacted regarding your pick-up and drop-off times. We will make every effort to accommodate all families who require the bus service. We are always looking at ways to improve the scope of our bus route to other areas. If you are not currently within the bus service area you can periodically call to see if any new areas have been added to our current route. Bus service may not be available to late applicants, as the route is determined at the beginning of each year.

Billing Procedure: Student ridership is recorded on a daily basis. This information is submitted to the school Accountant who will send you an invoice at the end of each month to be paid by cash or cheque (payable to Christ the King School) or e-transfer upon receipt. Payments are due by the end of the month, ex. October usage due by November 30th.

Note: There is a \$50.00 charge for any NSF cheques.

BUS FEES FOR 2024-2025

One Student	One Way Travel	\$113.00 per month
	Two Way Travel	\$215.00 per month
Family Rate: (2 or more children)	One Way Travel	\$162.00 per month
	Round Trip Travel	\$315.00 per month
Occasional Bus Users (Within designated bus route)	Billed Monthly	\$6.50 per ride

Student Name(s): _____ **Grade :** _____
(First) (Last)

Pick-Up/Drop-off address: _____

Home Phone: _____ **Cell Phone:** _____ **Email:** _____

Please indicate (V) the type of service you require:

_____ Regular use required _____ Pick-up **MORNING ONLY** _____ Drop-Off **EVENING ONLY**

_____ **BOTH** pick-up & drop-off

_____ Occasional Use

We estimate the number of times bus service will be required is _____ times per month.

Parent Signature: _____ **Date:** _____