## **VISTA TRANSPORTATION CONTRACT 2019/20**

**Bus Information:** www.cadets.com/student-life/bus-transportation

www.visitation.net/campus-life/bus-transportation

STUDENT NAME		
Last Name	First N	ame
HOME ADDRESS		2019-20 GRADE
CITY	STATE	ZIP
HOME PHONE	CELL PHONE	Mother
EMAIL	ratner	Mother
SCHOOL DISTRICT	DISTRICT #_	BIRTHDATE
The above student attends: Sain	t Thomas Academy	Visitation School
BUS RIDER DEPOSIT		
Cost is per student. Bus fee plu	s your district reimbursement, v	where applicable.
Bus routes are determined by t	he families who send a deposit	t by April 30, 2019
Bus route information will be ser	nt to families in August by email	l.
	aly 31, 2019. In addition to the f	e balance by September 30, 2019. The ee, I will remit my district reimbursement
Parent or Guardian Signature		Date
THE FOLLOWING INFORM	ATION MUST BE SIGNED E	BY ALL STUDENT RIDERS.
language, use alcohol, tobacco (chew o	r smoke), destroy property, or behave i	distract the driver, be loud or rude, use vulgar n a manner unbecoming of a Visitation or Saint behavior will jeopardize my commuting
Student signature		Date

## PLEASE RETURN SIGNED CONTRACT AND \$400 DEPOSIT TO:

VISTA Transportation 2455 Visitation Drive Mendota Hts., MN 55120

Mary Jo O'Halloran, 651-683-1770 mohalloran@cadets.com mohallor@vischool.org