

Family Name: \_\_\_\_\_

Phone Contact # \_\_\_\_\_

**All Saints Academy**  
**Shuttle Bus Service Form**  
*FILL OUT FORM COMPLETELY and return to school office*

This form should be filled out ONLY by families who are using ONLY shuttle bus services. If you are using the Grand Rapids Area Catholic Schools Transportation services to transport your children to and from school, you do NOT need to fill out this form. We are already including those children in our planning. We are interested in identifying children who will ONLY be using shuttle services with this form.

All Saints Academy will provide a shuttle bus between the Diamond Campus (PreK-4) and the Four Mile Campus (Grades 5-8). There is NO COST for the shuttle service; however, students DO need to be registered in order to ride the shuttle between campuses.

Parent/Guardian: \_\_\_\_\_ Phone number: \_\_\_\_\_

**To School (AM):**

\_\_\_\_\_ # of students in our family riding the shuttle FROM DIAMOND CAMPUS to FOUR MILE CAMPUS

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ # of students in our family riding the shuttle FROM FOUR MILE CAMPUS to DIAMOND CAMPUS

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

**Home from School (PM):**

\_\_\_\_\_ # of students in our family riding the shuttle FROM DIAMOND CAMPUS to FOUR MILE CAMPUS

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ # of students in our family riding the shuttle FROM FOUR MILE CAMPUS to DIAMOND CAMPUS

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Comments: Please list any questions or concerns you have about the shuttle service and we will contact you.

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