



STATESVILLE CHRISTIAN SCHOOL

1210 Museum Road · Statesville, NC 28625

704-873-9511 · Fax 704-873-0841

www.statesvillechristian.org

Bus Rider Registration Form

Student _____ Grade _____

Parents _____

Signature _____

Address: _____

Home Phone _____

***Must provide a number that you can be reached at during
Afternoon bus service time (3:00PM-3:45PM)**

***Mother's phone:**

Cell _____ **Work** _____

***Father's phone:**

Cell _____ **Work** _____

*****Important!!!*****

Additional people allowed to pick up your bus rider:

| Name | Relationship | Phone |
|------|--------------|-------|
|------|--------------|-------|
