



Vehicle Information Form

Parent/Guardian Name: _____

Student Name (s): _____ Grade (s): _____

Car Make: _____

Car Model: _____

Car Color: _____

Year: _____

License Plate Number: _____

I hereby authorize the above vehicle to pick up and drop off my child(ren). I understand that I am responsible for the above vehicle adhering to the school's pick up and drop off rules.

Parent/Guardian Signature: _____

Date: _____