

PROOF OF DESIGNATED ADDRESS

I, the undersigned, designate the address below as my child' address for transportation purposes:

Address: _____
 _____ Postal code: _____

My child is (*indicate name of child as it appears on the registration form*):

attending (*name of school*): _____, Grade: _____

The contact person at above address is:

Mr./Mrs.: _____

Telephone: (_____) _____

Transportation to the above address is required (*check one box only*) **starting on** (*indicate date*) _____

<input type="checkbox"/> Every day before <u>and</u> after school	<input type="checkbox"/> Every day before school only	<input type="checkbox"/> Every day after school only
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In case of an emergency, the school or the Transportation Department of the Eastern Townships School Board will be able to communicate with the above at all times.

With reference to Law 65 regulating access to documents held by public bodies and the protection of personal information, I accept that the information contained in the present document be used if needed.

I declare that the above information is true and recognize that the Eastern Townships School Board reserves the right to verify any of the information indicated above. Should there have been a false declaration, the Eastern Townships School Board may request reimbursement of all incurred expenses.

Signed on this _____ day of _____, _____ by:

PARENT (or legal guardian): _____

ADDRESS: _____

TELEPHONE: (_____) _____

**This form should be forwarded to the school.
Please note that a two-week delay may be necessary to process this request.**