

**AVOCA SCHOOL DISTRICT NO. 37
2018-2019 SCHOOL YEAR – BUS FEE PAYMENT FORM**

Name of Parent _____ Phone _____

Address _____

TWO-WAY BUS SERVICE:

	<u>Full</u> By 6/30	<u>Full</u> After 6/30	<u>Half</u> By 6/30, 11/1	<u>Half</u> After 6/30, 11/1
1 Child	\$500	\$575	\$250	\$287.50
2 Children	\$950	\$1025	\$475	\$512.50
3 Children	\$1400	\$1475	\$700	\$737.50
4 Children	\$1850	\$1925	\$925	\$962.50
Each add'l Child	\$450		\$225	

Child _____ Grade _____ Amount _____

Child _____ Grade _____ Amount _____

Child _____ Grade _____ Amount _____

Child _____ Grade _____ Amount _____

TOTAL _____

Method of Payment (Please select one)

Cash _____ Check# _____ MasterCard _____ Visa _____ Discover Card _____

Credit/Debit Card Payments (Additional Service Fee of 3.56% will be charged for credit and debit card payments)

Account Number _____

Name on the account _____ Expiration Date ____/____/____

Amount to be charged \$ _____

Signature of card holder _____

_____ Please check if you are electing to send a check to the Business Office for your second payment by November 1, 2018.

_____ Please check to give permission to the Business Office to charge your credit card on file for your second bus payment on November 1, 2018.

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Name of Parent _____ Phone _____

Address _____

ONE-WAY BUS SERVICE: (A.M. or P.M.)

	<u>Full</u> By 6/30	<u>Full</u> After 6/30	<u>Half</u> By 6/30, 11/1	<u>Half</u> After 6/30, 11/1
1 Child	\$250	\$325	\$125	\$162.50
2 Children	\$500	\$575	\$250	\$287.50
3 Children	\$750	\$825	\$375	\$412.50
4 Children	\$1000	\$1075	\$500	\$537.50
Each add'l Child	\$250		\$125	

Child _____ Grade _____ Amount _____

Child _____ Grade _____ Amount _____

Child _____ Grade _____ Amount _____

Child _____ Grade _____ Amount _____

TOTAL _____

Method of Payment (Please select one)

Cash _____ Check# _____ MasterCard _____ Visa _____ Discover Card _____

Credit/Debit Card Payments (Additional Service Fee of 3.56% will be charged for credit and debit card payments)

Account Number _____

Name on the account _____ Expiration Date ____/____/____

Amount to be charged \$ _____

Signature of card holder _____

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