

Trustworthy Transportation Services INC.

Office: 754-332-3613 or 786-271-4834

Student Information

Student's Name/Cell Phone:	School Student Attends:
Student's Name/Cell Phone:	School Student Attends:
Student's Name/Cell Phone:	School Student Attends:
Please indicate address of student pickup:	
Please indicate where Student is to be dropped off:	

Parent Information

Name of Parent/Legal Guardian:	Parent's Address:
Mother's Cell Phone:	Mother's Work Phone:
Father's Cell Phone:	Father's Work Phone:
Date transportation service is scheduled to begin:	
Please indicate which days of the week you are requesting transportation: Monday Tuesday Wednesday Thursday Friday Saturday	

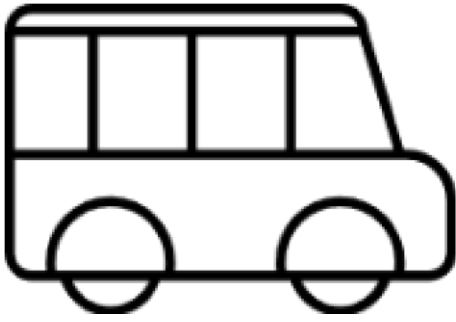
Please Indicate any Allergies:	Please Indicate Any Food Restrictions:
Name and Phone Number of Physician:	Please indicate any medications the child takes regularly:
Health Insurance Carrier and policy number:	Please Indicate Any Disability or Learning Disability:
Please Indicate Any Chronic Medical Conditions:	

Emergency Contact Information: Other than parents, in case of emergency.

Name:	Phone:
Name:	Phone:



Trustworthy Transportation
Services INC.



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FEE SCHEDULE:

Annual Registration Fee: \$25.00 First Child & \$15 Each Additional Child in Same Household (Non-refundable)

Weekly Fee: Round Trip \$ _____ or One Way \$ _____

Daily Fee: There is a standard daily fee of \$20+ per day (Depending on Location/Distance)

*If a child is out for an entire week, you will be charged a \$20 fee to retain their seat.

PAYMENT SCHEDULE:

Payment is due on **FRIDAY** for the **UPCOMING WEEK ONLY**

If services are provided for your child(ren) for 3 days in a week, it is considered a full week

If payment is not made by FRIDAY for the UPCOMING WEEK, transportation services will not pick up your child(ren) until payment is made. A \$10 Late Fee Charge will be applied if payment is not received by Sunday 11:59PM. There are no REFUNDS.

PAYMENT TYPES ACCEPTED:

Credit Card, Zelle, or Cash App

Attention: By signing this form, you are attesting that all information is accurate and complete. By signing this form, you agree to the Fee Schedule listed above and you agree that you have received a copy of the Fee Schedule.

Parent/Guardian Signature:

Please retain the bottom copy for your records!

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