



Agreement for Private Pay Transportation Service for Ineligible Bus Riders
 (Address of primary residence is less than two miles from school)

INSTRUCTIONS: The parent/guardian is to complete the form and send to Nelson's Bus Service, Inc., 2862 Siggelkow Road, McFarland, WI 53558 with a check in full payment of the amount specified.

In consideration for providing said transportation under this agreement the parent or guardian listed below shall pay the sum of \$370 for the first child and \$165 for each additional child named below. Payment shall be made in advance and may be refunded in whole/part only if lack of adequate registration numbers exist or the school district removes the child from the bus due to an overload of the bus. This service is provided on a space available basis. No refunds will be made for any other reasons.

A child may be removed from the bus for disciplinary/behavioral concerns.

Pick-up and drop-off locations must be consistent. A student may not be picked up or dropped off at a location that varies from day to day or week to week. For example, using one drop-off location on Mondays, Wednesdays and Fridays and a different one on Tuesdays and Thursdays is not allowed. However, a student may be dropped off at a different location after school than the location from which he/she was picked up before school, as long as this arrangement does not vary from day to day.

To promote and ensure safety, guest ridership will not be permitted. Notes will not be accepted.

Pick Up and Drop Off locations will be centrally located as a result a student may be picked up or dropped off at a location other than designated below.

I, _____, parent or legal guardian of the following child(ren):

Child's Name	AM Pick Up Location (Address)	Grade	School	Contact #

Child's Name	PM Drop Off Location (Address)	Grade	School	Contact #

whose primary residence is _____ request the McFarland School District/Nelson's Bus Service provide transportation to/from school of said children for the 2016-2017 school year.

If the child(ren) is being supervised by a person other than a parent or guardian before pick up or after drop off please provide contact information below.

Name	Relationship	Phone

WAIVER AND RELEASE: In consideration for the McFarland School District and Nelson’s Bus Service, Inc. providing transportation services to and from school, we, the student(s) and parent(s) or guardian(s), each agree to the following:

1. That we fully understand the services to be provided under this Transportation Agreement and the risks associated with those services.
2. That this service is provided on a space available basis and may be cancelled at any point.
3. That the student(s) shall have proper and adequate supervision before and after school, to and from the student’s home and the bus stop, and while the student(s) waits for the bus.
4. That we agree to release from liability, hold harmless, indemnify and waive our right to sue the McFarland School District, and its administrators, directors, school board members, agents, servants, teachers, chaperones, supervisors, volunteers, or bus drivers (collectively “MSD”), for all claims or damages, we separately or collectively may have, for personal injury, bodily harm, death, injury to or loss of property, emotional injury or loss of consortium, that may occur in connection with, arising from or by reason of this transportation agreement, whether caused by negligence or otherwise. We understand that we are not releasing the MSD from liability for claims or damages arising from a reckless or intentional act of the MSD.
5. That we further agree to release from liability, hold harmless, indemnify and waive our right to sue Nelson’s Bus Service, Inc., and its employees, agents, or servants, for all claims or damages, we separately or collectively may have, for personal injury, bodily harm, death, injury to or loss of property, emotional injury or loss of consortium, that may occur in connection with this transportation agreement, whether caused by negligence or otherwise. We understand that we are not releasing Nelson’s Bus Service, Inc. from liability for claims or damages arising from a reckless or intentional act of Nelson’s Bus Service, Inc.
6. We understand that this release applies to the students named below, his, her or their parent(s) or guardian(s), and their representatives, heirs, and assigns.
7. We have read this form in its entirety and understand and agree to the terms above.

IMPORTANT: DO NOT SIGN THIS WAIVER AND RELEASE UNLESS YOU FULLY UNDERSTAND THAT YOU ARE RELEASING THE ABOVE PARTIES FROM CLAIMS OR DAMAGES, INCLUDING THOSE ARISING FROM NEGLIGENCE.

Dated this _____ day of _____, 20____,

Parent / guardian signature #1

Parent / guardian signature #2

Printed Name

Printed Name

- Mail completed agreement with check made payable to: **Nelson’s Bus Service, Inc., 2862 Siggelkow Road, McFarland, WI 53558.**
- **Payment/registration must be received by July 15th**
- Any payment/registration received **after July 15th** will not be guaranteed addition to the bus route **until the week of September 14th.**
- Tentative school bus route information will be available on **Infinite Campus** by **August 15th**