

Bemidji Area Schools
Skyward-Family Access/Bus Request Registration

Email Address: _____

Skyward/Family Access - This is a secure (password only) service that will allow parents/guardians to view only their children's information.

Check one:

___ **Yes**, my child needs transportation for the 2018/19 school year. If yes, complete all the information below.

___ **No**, my child does not need transportation for the 2018/19 school year. If no, complete the Student name below.

Student/Family Information:

Student name (please print) _____

Parent : _____

Home address: _____

School attending _____

Pickup address: _____

Drop off address (at the end of day): _____

If split household please complete this section:

Secondary Name _____

Address: _____

Home phone _____ Cell phone _____ Work Phone _____

Daycare information: If pick-up or drop-off address is a daycare, please complete all fields below.
Daycare must be in the child's school attendance boundary:

Daycare Provider (First, Last): _____ Phone Number: _____

Daycare address: _____

Return to: District office located at 502 Minnesota Ave NW, Bemidji, MN 56601

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