

SVCS TRANSPORTATION INVOICE FOR VAN 2024-25 (WEST SACRAMENTO)

Please print or type. F	ill in all applicable spac	es. Use one applicatior	per family. Family ID		
Student Name			Grade		
Student Name			Grade		
Student Name			Grade		
Student Name		Grade			
Parent/Guardian:		Home P	Home Phone		
Address		Cell Pho	Cell Phone		
Email					
Options (BUS ROUTES) ATTN PARENTS: Any inter from parents. Please adv ATTN ਮਾਪੇ: ਜੇਕਰ ਤੁਹਾਡੇ ਬੱਚਿ ਅਤੇ ਬੱਸਾਂ) ਨੂੰ ਜਾਣਬੁੱਝ ਕੇ ਨੁਕਮ ਵਸੂਲਿਆ ਜਾਵੇਗਾ। ਕਿਸੇ ਵੀ ਬੇਲੋ ਕਰਕੇ ਆਪਣੇ ਬੱਚਿਆਂ ਨੂੰ ਬੱਸ ਅ	ntional damage caused to vise your children about ਤੁਆਂ ਦੁਆਰਾ ਸਕੂਲ ਦੀ ਜਾਇਦਾ ਸਾਨ ਪਹੁੰਚਾਇਆ ਜਾਂਦਾ ਹੈ, ਤਾਂ ਮ ਤੜੇ ਵਿੱਤੀ ਨੁਕਸਾਨ ਤੋਂ ਬਚਣ ਲਈ	bus and van etiquette t ਦ (ਵੈਨਾਂ ਾਪਿਆਂ ਤੋਂ ਹੀ ਕਿਰਪਾ			
Student 1	Additional sibling	Additional sibling	Additional sibling	Total ?	
	(1)	(2)	(3)		
\$100	+\$75	+\$50	+\$		
2 Installments: Total/2 is \$ due Aug 1 st /2 nd and Dec 2 nd for the 10 months and (total					
#) students.					
1 Installment:	Total \$ due	Aug 1 st /2 nd for the 10 m	nonths and (total	#) students.	

SVCS only accepts cash or checks made payable to Sacramento Valley Charter School. We do not accept any other methods of payment. must be enclosed in a sealed envelope with the student's name. Please download, print, and fill out this page. Forms will be accepted during the transportation orientation.

The transportation fee is non refundable except in cases where the request to cancel the transportation is received within two weeks of the receipt of the payment.

For all questions or concerns, please email the transportation team: info@sacvalleycharter.org