San Elizario Independent School District

Athletic Department
Bus Request Form

School:_____ Sport:_____ 7 8 9 JV V Boys Girls (Circle)

PLEASE INDICATE SCHOOL PICK-UP LOCATION:_____

COACH'S NAME:_____

SCHOOL PHONE:_____ EXT:_____ CELL:_____

DATE	PICK UP TIME	DESTINATION & GAME TIME	RETURN TIME	# OF ATHLETES	# OF BUSES

FAX/EMAIL COMPLETED REQUEST TO ATHLETICS @ 872-3921
APPROVAL CODE:_____ (DIRECTOR OF ATHLETICS)
NOTE: TBA TIMES & LOCATIONS LISTED ON YOUR SCHEDULE, MUST BE CALLED IN 24 HOURS IN ADVANCE
TRANSPORTATION #: 872-3982