

Summit Academy Bus Reservation Request 2026-2027

Call 734/941-1750 to confirm bus availability or email to mgriffi@summit-academy.com. Scan the original form to email or inter-office mail a hard copy. Once the reservation is received and booked, you will receive a billing/booking number via Summit email. Thank you.

Staff Member: _____ Today's Date: _____

Building: ELC North Elem. MS HS Room/Dept: _____
(Circle one please)

To be paid for by: Students _____ Dept. Funds _____ Summit Academy C.O. _____

Bill to be sent to: _____

Bus Arrival at School:	
Arrival at location:	
Departure from location:	
Arrival back at school:	

(Please fill in times to the best of your knowledge)

Special Instructions for Teachers/Chaperones

1. Please assist the driver with unacceptable student behaviors (i.e. – screaming, moving seat to seat with bus in motion, jumping on or over seats.)
2. This is best helped if chaperones will strategically sit in the very front seat of the bus and another in the very rear of the bus.
3. If you have multiple busses, then those chaperones or parents who might be driving their own cars **MUST** follow the LAST bus only.
4. Please try to limit the eating and drinking by your class as busses left dirty may be billed a cleaning charge.

Date of Field Trip: _____

A typical bus carries 77 small passengers (first/second graders) at 3 per seat or 51 larger passengers at 2 per seat..

Number of buses needed: _____

Field Trip to where: _____

Address: _____, City _____ Phone _____

Please pick up my students in the at which school door? _____

Special Instructions: _____

- **PLEASE** attach a map for directions for the driver(s). *** Building administrator must sign this bus form ***
- **First 3 hours is \$100, then up to 6 hours is \$200 and \$35/hour after 6 hours. First 60 miles are free, then \$2.00/mile thereafter.**

Administrator Approval: _____ Date: _____

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(Please do NOT write below this line. It is for transportation use only.) Summit Triumph Other: _____

Order#: _____ Driver:: _____ Bus # _____

Start Mileage: _____ End Mileage: _____ Total Miles: _____

Bus Stage Time: _____ Depart Time: _____ Return Time: _____ Total Time: _____

Staff Signature: _____

Please attach a map!!