Church Telephone: (336) 785-0527		
Bus Captain's Telephone:P/U Time:		
Berean Baptist Church		
Bus Rider Information Form		
Top Copy - Church Middle Copy - Parents Bottom Copy - Bus		
Captain: Route Number		
Bus Stop Address:		
City: State: Zip: Phone:	_	
Parent /Guardian's Name:	1	
NAMES OF BUS RIDERS Birthdate Saved On Baptized On	_	
	_	
:	n	
: <u></u>		
5: <u></u>		
j:	-	
Special Instructions:	-	
special instructions.	<u> </u>	On
	_	
have read and understand the purposes and beliefs of the BEREAN		
APTIST CHURCH that are stated on the other side of this form. I also		
nderstand that unless otherwise noted, anyone who is listed on this form vill be given an opportunity to follow the Lord in believer's baptism if they		_
rust Christ Jesus as their personal Saviour. Understanding this, I give my		
ermission for the children listed on this form to attend the Sunday School and	12.7	
hurch Services and be taught the Bible at BEREAN BAPTIST CHURCH or	\N lso	
ny of it's related Sunday School or Church activities. I also understand that	rm	
nould there be disciplinary problems with any of my children that can not be prrected in a Biblical manner while they ride the bus or attend any of the afore	iey	
entioned activities, that my child(ren) may lose their privilege to ride the	my	
us to Church until the disciplinary problem is corrected and resolved to the	ınd	
atisfaction of BEREAN BAPTIST CHURCH and with us as the parents or guardians	or	
f the child(ren). (Please make a note of any specific instructions in the space above.)	hat	IAN
	be	also
	ore	orm
Signature of Parent or Guardian Date	the	they
	the	my
	ans	and
Of the chirectory, (Trease make a note of any opening may account in the party	/e.)	I or

of the child(ren). (Please make a note of any specific instructions in the space above.)

Signature of Parent or Guardian

Signature of Parent or Guardian

Date

Date

that be

fore the