

MFRC (MILITARY FAMILY RESOURCE CENTER) FORM

TO BE FILLED OUT ONLY IF YOUR CHILD REQUIRES TRANSPORTATION "TO" AND "FROM" THE MFRC

Families who bring their child(ren) to the MFRC in the morning and / or pick them up at the MFRC at the end of the day must fill out this form in order to be entitled to the school transportation from this location.

		STUDENT IDENTIFICA	TION		
Student Name (first / last):					Grade:
Mother's Name (first / last):					
Father's Name (first / last):					- -
HOME ADDRESS OF STUDEN	T(S) (as shown	on enrolment form)			
		☐ Father's	☐ Mother's		Other (specify)
HOME TEL.					No Transportation Required
NO.		STREET			A.M. Only
CITY	PROVINCE	POSTAL CODE	_		P.M. Only A.M. & P.M.
-				Ш	A.IVI. & P.IVI.
		MFRC			
		418-677-4000			
	ıles will be accepted		veek, every morni	ng etc	······································
	ules will be accepted		veek, every morni	ng eta	;)
	ules will be accepted	d, i.e., 1 week / 1 week, 3 days/v	•	ng eto	;)
	-	d, i.e., 1 week / 1 week, 3 days/v AM	•	ng eto	····)
	MONDA	d, i.e., 1 week / 1 week, 3 days/v AM AY	•	ng eto	;)
	MOND/ TUESD	d, i.e., 1 week / 1 week, 3 days/v AM AY AY ESDAY	•	ng eta	····)
	MOND/ TUESD WEDNE	AM AY ESDAY	•	ng etc	····)
Please note that only steady schedu	MONDA TUESD WEDNE THURS	AM AY ESDAY	•	ng eto)
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Completed form is to be forwarded to the Transportation Department, transport@cqsb.qc.ca