



J & M Vera School Bus Service, Inc.

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FIELD TRIP CONFIRMATION FORM

We are very pleased to provide you with our bus transportation services. We will try our best to accommodate you in all your bus service needs. To better do so, please read and fill out the following questions.

DATE OF TRIP: _____ NUMBER OF BUSES: _____

PICK UP AT (name & address): _____

PHONE NUMBER: _____ FAX NUMBER: _____

DESTINATION 1 (name & address): _____

PICK UP TIME (at school): _____ AM _____ PM DEPARTURE TIME (from trip): _____ AM _____ PM

DESTINATION 2 (name & address if applicable): _____

DEPARTURE TIME (from 2nd stop): _____ AM _____ PM

Note: Additional stops must be scheduled prior to the date of the trip. An extra charge may be applied.

FORM OF PAYMENT: (please check all that apply)

DISTRICT P.O. INTERNAL FUNDS SCHOOL CHECK CASH OTHER

PURCHASE ORDER NUMBER *: _____

*A district PO or internal fund PO number is required prior to guaranteeing school bus service.

CONTACT NAME: _____ CONTACT EMAIL: _____

CONTACT PHONE NUMBER: _____ EXT. _____ CELL: _____

APPROVED BY:

Full Name Date

In lieu of a written signature J & M Vera School bus requires a unique identifier used only for verification purposes.

Month of Birth _____ Day of Birth _____

Note: A 48 hour cancellation notice is required or an additional charge may be applied. If a bus is cancelled after arriving at the pickup destination the full price may be applied. All cancellations MUST be in writing.

J & M Vera use only

Buses available: _____ Unit Cost: \$ _____ Total Cost: \$ _____

Approved By: _____ Date: _____