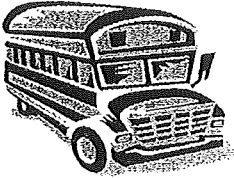




South Delta Secondary School 750 53rd Street, Delta, BC V4M 3B7

604 ♦ 943 – 7407 Main Office
604 ♦ 943 – 7405 fax

BUS BOOKING FORM



Date of order: _____

Ordered by: _____

Activity: _____

Supervisor: _____

DEPARTURE

Pick up location: **SOUTH DELTA SECONDARY**

Date of pick up: _____

Time: _____

of passengers: _____

Destination: _____

Address of Destination _____

RETURN

Pick up location: _____

Time: _____

of passengers: _____

Estimated time back to SDSS: _____

APPROVAL: _____