



Public Transportation Services of the Isabella County Transportation Commission

YOUTH RIDER PROFILE FORM

Ride Line 989.772.9441

ictcbus.com

Rider Information (Please print)

First name \_\_\_\_\_

Last name \_\_\_\_\_

Date of birth \_\_\_\_\_

City \_\_\_\_\_

Home address \_\_\_\_\_

Primary phone/Relationship \_\_\_\_\_

Alternate phone/Relationship \_\_\_\_\_

Email address \_\_\_\_\_

Special accommodation? \_\_\_\_\_

EMERGENCY CONTACT INFORMATION (Please print)

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Contact phone(s) \_\_\_\_\_

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Contact phone(s) \_\_\_\_\_

Can child be dropped off without an adult present? Yes \_\_\_\_\_ No \_\_\_\_\_

Bus Rules/Top Requests received by parent Yes \_\_\_\_\_ No \_\_\_\_\_

Parent signature \_\_\_\_\_ Date \_\_\_\_\_