

**ALL ATHLETIC, BAND, OR FIELD TRIPS USING BUSES  
BUS REQUEST FORM**

**DATE:** \_\_\_\_\_ **Use this form.**

**This form must be filled out and faxed to the Colbert County Bus shop for every trip taken. Fax: 256 389-8014 Please fax within three days of trip.**

**DATE OF TRIP** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_ **GRADE** \_\_\_\_\_

**TEACHER** \_\_\_\_\_ **PRINCIPAL** \_\_\_\_\_

**NUMBER OF STUDENTS** \_\_\_\_\_ **NUMBER OF ADULTS** \_\_\_\_\_

**CHECK ONE: (ATHLETIC TRIP \_\_\_\_\_ OTHER \_\_\_\_\_)**  
(Coaches, fax a few days before each game)

**DESTINATION** \_\_\_\_\_ **TIME LEAVING SCHOOL** \_\_\_\_\_

**TIME RETURNING** \_\_\_\_\_

**DRIVER** \_\_\_\_\_ **APPROVED BY** \_\_\_\_\_  
**Principal sign**

.....  
**TO BE COMPLETED AT COLBERT COUNTY BUS SHOP**

**CONFIRMED DATE** \_\_\_\_\_

**CONFIRMED BUS DRIVER** \_\_\_\_\_

**SIGNED** \_\_\_\_\_ **DATE** \_\_\_\_\_  
**Aubrey Kimbrough**