

Southland Charters Information Form

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|---|---|--|
| Today's Date: | Today's Time: | This is for: Booking <input checked="" type="checkbox"/> Quote <input type="checkbox"/> |
| Name of Person: Tanya Vanderburgh | | |
| Phone Number: 403-327-4386 | Alternate Number: | Fax Number: 403-327-2007 |
| Email Address: vanderburgh@holyspirit.ab.ca | | |
| Secondary Person's Name: Darlene Stovel | | |
| Secondary Email Address: stoveld@holyspirit.ab.ca | | |
| Organization or Name of Group: St. Patrick Fine Arts Elementary | | |
| Address: 80 Rivergreen Road W | | |
| City: Lethbridge | Province: AB | Postal Code: T1K 7Y1 |
| Type of Bus Requested: School | #. of Passengers going on the Trip: | Grade of Passengers (if applicable): |
| Event Type: | In Town <input checked="" type="checkbox"/> | Out of Town <input type="checkbox"/> |
| Special Requests: | | |
| Date of Pickup: | Pickup Address: St. Patrick Fine Arts Elementary Lethbridge, AB | Drop Off Address: |
| Time of Pickup: | | |
| Date of Return: | Return Pickup Address: | Return Drop Off Address: St. Patrick Fine Arts Elementary Lethbridge, AB |
| Time of Return: | | |
| Is Trailer Needed: <input type="checkbox"/> | Is a Bin Bus Needed: <input type="checkbox"/> | Price: |
| Overnight Required: <input type="checkbox"/> | Is W/C Bus Needed: <input type="checkbox"/> | |
| Waybill #: | Emailed Waybill Date: | Emailed Waybill Time: |
| School Scheduling: <input type="checkbox"/> | Staff Member Who took information: _____ | |
| General Scheduling: <input type="checkbox"/> | Staff Member who emailed waybill: _____ | |