

Bee Best Transportation FEES

***Please fill out your children's names and check the appropriate program.
Please submit this signed form, accompanied by a cash payment, to the front desk staff.
Transportation fee is due on October 10th, 2025***

Time Period: **September 29-October 24, 2025 (4 weeks)**

Student Name(s): _____

Amount Attached: \$ _____

Choose Program:

	Program	Transportation Fee
<input type="checkbox"/>	5- Day	\$ 120.00
<input type="checkbox"/>	4- Day	\$ 100.00

Please call your child's driver on **EACH day** your child does not need to be picked up. The driver's pick-up fee is fixed for the month. No credit is given for vacations or sick days. By signing below, I/we release any liability against Bee Best Learning Center and any driver associated with transportation activities.

Parent's Signature

Date

+++++

Bee Best Transportation FEES

***Please fill out your children's names and check the appropriate program.
Please submit this signed form, accompanied by a cash payment, to the front desk staff.
Transportation fee is due on October 10th, 2025***

Time Period: **September 29-October 24, 2025 (4 weeks)**

Student Name(s): _____

Amount Attached: \$ _____

Choose Program:

	Program	Transportation Fee
<input type="checkbox"/>	5- Day	\$ 120.00
<input type="checkbox"/>	4- Day	\$ 100.00

Please call your child's driver on **EACH day** your child does not need to be picked up. The driver's pick-up fee is fixed for the month. No credit is given for vacations or sick days. By signing below, I/we release any liability against Bee Best Learning Center and any driver associated with transportation activities.

Parent's Signature

Date