



Transportation Form

Glen Arbor Art Center
After School Art Program

Please submit this form to the Glen Lake Elementary office prior to the first day of your registered session.

Select Session:

___ **Session 1:** Dates: Thursdays: November 18; Dec 2, 9, 16; Jan 6

My child(ren) _____,
has/have my permission to take the bus to the Glen Arbor Arts Center for the After School Art program. The bus will arrive at the Glen Arbor Arts Center at approximately 3:50 PM and will be met Glen Arbor Art Center staff.

1st Child's name: _____

Grade: _____

Teacher: _____

2nd Child's name: _____

Grade: _____

Teacher: _____

Parent pick-up is at the Glen Arbor Art Center at 5:30 PM.

Parent signature: _____

Parent Name (print): _____

Parent Phone Number: _____

For answers to questions please contact:

Glen Arbor Arts Center

6031 S Lake Street Glen Arbor, MI 49636

231-334-6112

glenarborart.org