



WJCC BRIGHT BEGINNINGS INFORMATION CHANGE FORM

Fax: 757-645-4118

Phone: 757-564-8721

Student Name: _____

BB School Child Attends: (Check one)

Laurel Lane Clara Byrd Norge J. Blaine Blayton DJ Montague

Parent/Guardian's Name (Print): _____

Parent/Guardian's Phone #: _____ Effective Date of Change: _____

Place a check beside all information to be changed & include specific information below:

_____ Home address (if you have moved, please attach a completed Residency Affidavit Form with necessary documents that confirm your new address. Acceptable documents for proof of address are listed on the Residency Affidavit)

_____ Phone New Phone #: _____

Is this phone number replacing another number we have on file? If so, please let us know which phone # to **delete** _____

_____ Parent/Guardian's Work: _____

_____ Bus pick-up _____ Bus Drop-off _____ Both (Bus pick up & drop off)

_____ Transportation Other per Parent/Guardian Request (change w/ Booster, Seatbelt, Safety vest, etc.)

Print specific information change(s) here (for bus pick up and/or drop off or change in home address include the street, city and zip code):

Parent/Guardian Signature: _____ Date: _____

****Please send this completed form to your child's teacher when any important information changes. Shayna Gregory, Preschool Administrative Assistant – Email: shayna.gregory@wjccschools.org**

Office Use Only-----

Synergy Vue

Transportation (if applicable)