



# 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](mailto:shayna.gregory@wjccschools.org)**

Office Use Only-----

Synergy Vue

Transportation (if applicable)