

To: Primary School Office / Lakeside School Office

My child,

has permission to ride the designated St. Bridget's Faith Formation bus after school to St. Bridget of Sweden Catholic Church on the following Wednesdays of the 2025-2026 school year:

October: 22ⁿ, 29th

November: 5th, 12th, 19th

December: 10th, 17th

January: 7th, 14th, 21st, 28th

February: 4th, 11th, 25th

March: 4th, 18th, 25th

April: 8th, 15th, 22nd, 29th

May 6th, 13th, 20th

Parent Name: _____

Signature: _____

Date: _____

Parents, please submit this to your son/daughter's classroom school teacher or school