

TRINITY ACADEMY
1205 6th Street
Hudson, WI 54016
715-386-9349

Following is the information required to drive students of Trinity Academy:

Name _____

Address _____

Home Phone _____ Cell Phone _____

Please provide us with a copy of the following documents:

- Drivers license
- Proof of insurance
- Vehicle registration

This information must be on file by September 30th of each school year.

I understand that my insurance company is the primary coverage should there be an accident.

Signature

Date