



St. Michael the Archangel

Diocesan Regional Catholic High School

www.smhsbr.org

SMHS Shuttle Bus Information for 2026-2027 School Year

Dear Parents:

Please review the following information and utilize the registration form below for the SMHS Shuttle Bus Service being offered to our students for the 2026-2027 school year.

Some specifics to know:

- Students must have their parents or guardian supervising them while waiting for bus pick-up each morning. Parents/guardians must also be present in the afternoon at drop-off time so as not to delay the shuttle going to the next site.
 - Should a student not have someone at the bus drop-off site, the driver will keep the student on the bus and travel to the next bus drop-off site, and then back to SMHS where the parent will be expected to pick up the student immediately.
 - Should this recur frequently, the student may be removed from the shuttle.
- The fee for this bus service breaks down as follows and must be **paid in advance**:
 - \$1,000 for the year per rider.
 - \$ 100 per month for each child.
 - \$ 75 per month for each child after the first.
- Return of the attached form with information filled in completely must be returned to Lori Steib, Registrar by email at lsteib@smhsbr.org, mail or fax. **To be sure your child is registered for the start of the school year, return the form before August 5, 2026.**
 - Registration for shuttle bus service may take place any time after the school year begins; however, monthly fees are not prorated.
- The After Care fee will be added to your FACTS account at the beginning of each semester. If you have questions about payment, please contact Susan Thibodeaux at 225-753-9782 x25 or sthibodeaux@smhsbr.org.
- The following times are approximate and more accurate drop-off/pick-up times will be provided during the first week of August.

<u>Routes</u>	<u>Approximate Pickup Time</u>	<u>Approximate Drop-off Time</u>
St. John	6:20 am	3:30 pm
St. George	6:40 am	2:55 pm

Please contact the school office to speak with Lori Steib, Registrar at 225-753-9782 ext. 12 if you have any questions. Your cooperation is most appreciated.

Sincerely,

Jared Cavalier
Principal



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SMHS SHUTTLE BUS SERVICE 2026-2027 Student Rider Registration

Student Rider 1: _____ Grade: _____

Student Rider 2: _____ Grade: _____

PHONE #'s TO BE REACHED DURING SHUTTLE BUS OPERATION

Parent / Guardian 1

Parent / Guardian 2

Name:	_____	_____
Cell	_____	_____
Phone:	_____	_____
Home	_____	_____
Phone:	_____	_____
Work	_____	_____
Phone:	_____	_____
Email	_____	_____
Address:	_____	_____

Emergency Contact 1

Emergency Contact 2

Name:	_____	_____
Cell	_____	_____
Phone:	_____	_____

Please indicate below which route(s) the student(s) will be riding:

AM Bus: _____

PM Bus: _____

Check your payment option to be billed in FACTS: (For additions/changes, notify Registrar)

Fall Semester 1 (\$500) **Spring Semester 2 (\$500)** **Both Semesters (\$1000)**

I understand that my child must obey all school rules and all rules established by the Shuttle Bus service director. Students must be dropped off and picked up at their stop on time. Failure of a student to follow the rules or failure of a parent to pick up their child on time may result in the student being unable to utilize the Shuttle Bus service.

Parent signature: _____ **Date of signature:** _____

Return this form to Lori Steib at lsteib@smhsbr.org or drop off at the front office.

17521 Monitor Ave Baton Rouge, LA 70817-2640
Phone 225.753.9782 Fax 225.753.0605