



The
Calverton
School



Transportation 2025/26

The Calverton School is committed to assisting our families with a safe and efficient means of transportation to and from school. Transportation services provided by JAQCC Shuttle Services are designed with the safety and welfare of our students as priority.

JAQCC will offer services to the following areas although all routes are subject to change or cancellation depending on interest and registration.

Routes offered:

Southern Anne Arundel
Northern Calvert
Prince George's County
Charles County

Fees: JAQCC Transportation Rates - \$5,375.00 -Roundtrip plus \$200 installment fee (applicable to monthly and quarterly payment plans only).

****Calverton Student Discounted Rate – \$3,150.00 – Must be enrolled by July 1, 2025 to receive discounted rate**

Registration: Please follow the following steps:

1. Visit: www.jaqccshuttle.com
2. Click the tab: Documents
3. Put in the password: **jaqccshuttle21**
4. Select: Student Registration Form 2025-2026
5. Print and complete the form and scan it back to: **Jaqccshuttle@gmail.com**

The registration fee has been waived - please write **"WAIVED CALVERTON"**

Once JAQCC receive each completed form, they will schedule a call to review the payment plan options (i.e. annually, quarterly, monthly) and to complete the registration process by speaking with you and answering any questions.

Note: The discount will not be applied to your account until the process is finalized. Your credit card will not be charged until the process is finalized and the payment option has been selected.

If you have questions or need additional assistance please call or email: **officemanager@jaqccgroup.com** or call **410-618-1343**

RENEWAL AGREEMENT FOR CURRENT RIDERS ONLY

YEAR 20__20__

Name of Student: _____

First Name

Middle Name

Last Name

Nickname: _____ Date of Birth: _____ Gender: () Male () Female

Address: _____

Number and Street Name

City

State

Zip Code

Home Phone: _____

Mother

Father

Full Legal Name: _____

Occupation: _____

Employer: _____

Business Phone: _____

Cell Phone: _____

E-mail Address: _____

Address: _____

(If different than student) _____

Status of Parents: () Married () Divorced () Single Applicant lives with: _____

Does your child have any allergies, asthma, seizures or chronic illness? () Yes () No

If yes, please specify: _____

Are medications needed for this condition? () Yes () No

If yes, please specify: _____

Has the student been diagnosed with any ailment, behavioral or developmental difficulties, or emotional or behavioral challenges that may or may not impede his/her learning process (i.e. speech, hearing, vision)? If yes, please specify.

Emergency Contacts to contact in the event parents are unavailable / any other authorize person(s) authorized to pick up

(1) _____

(2) _____

(3) _____

County of Residence _____ to _____ in _____ County (hereinafter referred to as "Client"), hereby retains JAQCC LLC (hereinafter referred to as "JAQCC SHUTTLE SERVICE") in connection with providing round-trip transportation for the Client's minor child (name of child), _____, Entering Grade _____, Age: _____ to and from the _____ SCHOOL located at _____ (hereinafter referred to as "School").

Qualify for renewal special (only if paid in FULL) y__n__

Registration fee: \$175 y__n__

Installment: \$150 y__n__

Name of School & Route For 20__-20__: _____

hereby enroll my above named child on JAQCC Shuttle for the 20__-20__ school years. I understand my tuition is due for the full year of service and no refunds will be issued whatsoever after my renewal is confirmed.

Parent / Guardian printed name

Date

Parent / Guardian printed name

Date

CONTACT PARENT'S NAME _____

Phone number _____

Email _____

Driver License #: _____

Signature _____ Date _____