

Dear Parents:

If you are interested in inquiring about transportation, please complete the form below and return it to L. T. Transportation, Inc. by **email or mail**. The bus company will contact you to discuss your specific needs.

<b>email or mail to:</b>	<b>L. T. Transportation</b> <b>45 Park Avenue</b> <b>Mt. Vernon, NY 10550</b>
<b>phone:</b>	<b>(914) 826-6118</b>
<b>e-mail:</b>	<b>Erose1883@gmail.com</b>

I am interested in transportation to the Hudson Country Montessori School, New Rochelle for **2025/26 School Year**. Please contact me as soon as possible.

Name of Parent\_\_\_\_\_

Name of Child/Children\_\_\_\_\_

Mailing Address\_\_\_\_\_

City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Transport Address (if different from above mailing address)

\_\_\_\_\_

Nearest cross street to transport address:\_\_\_\_\_

Telephone: Home\_\_\_\_\_ Work\_\_\_\_\_

Session to be transported: Morning\_\_\_\_\_ Mid Day\_\_\_\_\_ Full Day \_\_\_\_\_

Date service to begin\_\_\_\_\_