

# Summer

## TRANSPORTATION REQUEST FORM

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January 2019

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.

**email or mail to: L. T. Transportation**  
**45 Park Avenue**  
**Mt. Vernon, NY 10550**

**phone: (914) 826-6118**  
**e-mail: Jyustis2004@netzero.com**

I am interested in transportation to the Hudson Country Day Camp, New Rochelle for **Summer 2019**. 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 \_\_\_\_\_