

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.

<p><b>email or mail to:</b> L. T. Transportation 45 Park Avenue Mt. Vernon, NY 10550</p> <p><b>phone:</b> (914) 826-6118 <b>e-mail:</b> Erosee1883@gmail.com</p>
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I am interested in transportation to the Hudson Country Montessori School, New Rochelle for **2022/23** **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 \_\_\_\_\_