

Greater Amstедam School District

Amsterdam, NY 12010

Request for Child Care Transportation

Due April 1 of the preceding school year

School Building (Circle One):

Barkley

Marie Curie

McNulty

Tecler LLA

St. Mary's

Whispering Pines

Student Name _____

(Last name)

(First name)

Student Name _____

(Last name)

(First name)

Home Address _____

Grade _____ Home Phone _____ Cell Phone _____

Care Giver

Name of Care Giver _____

Address _____

Phone Number _____ Cell Number _____

Parent/Guardian Signature _____

Work Place _____ Work Phone Number _____

Transportation Needed: A.M. _____ P.M. _____

DATE _____

*To be filled in by School or Transportation

Trip Number _____ Stop _____