



### TRANSPORTATION FORM

CAMPER #1: \_\_\_\_\_ DOB \_\_\_\_\_  M  F

CAMPER #2: \_\_\_\_\_ DOB \_\_\_\_\_  M  F

CAMPER #3: \_\_\_\_\_ DOB \_\_\_\_\_  M  F

### PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN NAME \_\_\_\_\_

BEST CONTACT PHONE # \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_

BEST CONTACT PHONE # \_\_\_\_\_

### OTHER GUARDIAN(S) INFORMATION

Please list the contact information of anyone (other than parent(s) or guardian(s) listed above) that are approved to meet your children at their bus pick-up / drop-off location.

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

**PRICING**  
 \$200/week for round trip busing  
 \$75/week for each additional sibling

### PAYMENT INFORMATION (Please check one)

Please charge the credit card I provided on my camp application for the full cost of transportation, in the amount of \$ \_\_\_\_\_

I have enclosed a check for the full cost of transportation, in the amount of \$ \_\_\_\_\_

