REQUEST FOR PRIVATE/PAROCHIAL TRANSPORTATION FABIUS-POMPEY CENTRAL SCHOOL DISTRICT

	Date	
Board of Education District Office Fabius-Pompey Central Scl 1211 Mill Street Fabius, NY 13063	hool District	
In accordance with the lav	ws of the State of New York, I hereby for	mally request
transportation for		
to		
	(School's name)	
(School's address)	(Sc	chool's phone number)
during the upcoming schol	lastic year on all days this school is in se	ession. The pupil
	ransportation is now years of age, otember 20 and resides at	
(Home phone)	(Parent's cell phone) (E	mergency phone)
	request directly, I wish to inform you that	t I have authorized the
	at position, to be my representative in rec	
This authorization shall rem	main effective while I have my child in atte	endance at
	or otherwise revoke this r	request.
	Parent's/Guardian's Signat	ture