Warwick Valley Central School District Transportation Department P.O. Box 595, Warwick, NY 10990

Phone: 845-987-3035 E-Mail: transportation@wvcsd.org

Forms are due on or before July 26, 2024. A new child care form must be submitted every school year. Forms received after July 26 will not start until 9/16/24. Parents are advised to make alternate arrangements until such time their childcare starts. All children transportation requests will take 5-7 business days to process.

Childcare Transportation Request

	•		Date:
Student	Child's First Name (print):	Child's Last	Name (print):
	Home Address (house/apt. no. and street):		
	Mailing Address (if different):		
	Home Phone:Cell:		
	School:		
	J		
	1		
Childcare	Childcare Provider's Name:		
	Childcare Provider's Address:		
	Childcare Provider's Phone #:		
	Start Date:	<u> </u>	
	AM Pick-up (Same location five (5) days a week) PM Drop-off (Same location five (5) days a week)	☐ Home ☐ Home	□Childcare □Childcare
	that all the information contained on this form is accurate a cording to the Warwick Valley Central School District Board F		e-named student is under my care on a regular
Signature of childcare provider:		Date:	
Both Pa	rents/Legal Guardian(s) must sign below:		
<i>Print</i> Na	ame of Parent/Legal Guardian (1):		
Signatu	re:		Date:
<i>Print</i> Na	ame of Parent/Legal Guardian (2):		
Signature:			Date:
Email A	ddress of Parent/Legal Guardian:		
For office	use only: DATE RECEIVED: ACTION TA	KEN: AM Bus	PM Bus