



MTA Customer Service  
1401 South Dort Hwy.  
810-767-0100

# Mass Transportation Authority Transportation Request For Peak Service (2011-2012)

*PARENT: Fill in information and return to school*

*SCHOOL: Enter information into Excel spreadsheet and forward to ORRP@mtaflint.org*

\_\_\_\_\_ **Date**

**Name of School** \_\_\_\_\_

*(Please put name of school on this line)*

Parent Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Zip \_\_\_\_\_

*(Address Change?):* YES

NO

<> Please list ALL children in household on one form <>

Students First and Last name    DOB    Grade

Students First and Last name    DOB    Grade

Students First and Last name    DOB    Grade

Students First and Last name    DOB    Grade

Students First and Last name    DOB    Grade

Students First and Last name    DOB    Grade

If your child is in Pre-K or Kindergarten, please check a.m. or p.m. time:    **A.M.**    \_\_\_\_\_    **P.M.**    \_\_\_\_\_

Nearest Intersection To PICK-UP Address: \_\_\_\_\_

Nearest Intersection To DROP-OFF Address: \_\_\_\_\_

If you used a bus stop last school year, please give location: \_\_\_\_\_

*\*\*\* For MTA Office Use Only \*\*\**

**A.M. Route #:** \_\_\_\_\_

**P.M. Route #:** \_\_\_\_\_

**A.M. Bus Stop:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**P.M. Bus Stop:** \_\_\_\_\_ **Time:** \_\_\_\_\_