



MTA Customer Service
 1401 South Dorset Hwy.
 810-767-0100 (Fax): 810-237-8711

Mass Transportation Authority Transportation Request For Peak Service (2020-21)

***PARENT:** Fill in information and return to school*

***SCHOOL:** Process form as per MTA Customer Service instructions*

(Request form **MUST** be submitted each year, even if you had service last year)

_____ **Date**

Name of School _____

(Please put name of school on this line)

_____ Parent LAST, FIRST name

_____ Home Phone

_____ Cell Phone

_____ Address

(Address Change?): YES

NO

_____ City

_____ Zip

<> Please list ALL children in household (going to school listed above) on one form <>

_____ Student LAST and FIRST name Date of Birth Grade

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Nearest Intersection To PICK-UP Address: _____

Nearest Intersection To DROP-OFF Address: _____

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

_____ Parent Signature *(Must be signed)*

_____ Date