

SAINT DOMINIC ACADEMY

TRANSPORTATION REQUEST FORM 2015-2016

We anticipate the following bus routes for the coming school year based on our past experience. The final bus routes and cost cannot be determined until registration is completed and transportation contracts have been negotiated. We attempt to optimize the bus route and balance time on the bus with convenience for parents. We cannot guarantee door-to-door service and we have established a maximum bus route time of 90 minutes.

If you are interested in transportation, but do not see your town listed, please contact Ms. Negrón in the Business Office at 201-434-5938 ext. 28.

Bus transportation fees are nonrefundable and will be charged on a semester basis, fall and spring. To reserve your seat please complete and return this form with your payment indicated for the bus route selected. A sisters discount of \$50 per semester fee is awarded to sisters receiving the tuition discount.

Priority is given to round trip students. Round trip reservation forms, with payment for the fall semester, are due by APRIL 15TH. After this date reservations will be open for one-way bus service. Reservations will be accepted as they are received, until the bus is full. The spring semester payment for the same amount will be billed later and due November 1st.

NO RESERVATION WILL BE ACCEPTED WITHOUT PAYMENT

☐ **BUS ROUTE #1: ESSEX/PASSAIC/BERGEN (INCLUDING: BELLEVILLE, NUTLEY, N. ARLINGTON, LYNDHURST, HASBROUCK HEIGHTS, PASSAIC)**

ROUND TRIP PER SEMESTER COST: \$1,100

ONE-WAY PER SEMESTER COST: \$750 ☐ AM ☐ PM

☐ **BUS ROUTE #2: JERSEY CITY, KEARNY, BAYONNE**

ROUND TRIP PER SEMESTER COST: \$1,000

ONE-WAY PER SEMESTER COST: \$700 ☐ AM ☐ PM

☐ **BUS ROUTE #3: DOWNTOWN JERSEY CITY, HOBOKEN (INCLUDING NJ TRANSIT TERMINAL)**

ROUND TRIP PER SEMESTER COST: \$1,000

ONE-WAY PER SEMESTER COST: \$700 ☐ AM ☐ PM

☐ **BUS ROUTE #4: NORTH HUDSON (INCLUDING: NORTH BERGEN, UNION CITY, WEEHAWKEN, GUTTENBERG, FAIRVIEW, WEST NEW YORK)**

ROUND TRIP PER SEMESTER COST: \$1,100

ONE-WAY PER SEMESTER COST: \$750 ☐ AM ☐ PM

☐ **OTHER REQUESTS:**

ADDRESS: _____

ROUND TRIP ☐

ONE-WAY ☐

Name of Student _____ Grade _____

Name of Parent or Guardian _____

Address _____ Phone _____

Signature _____ Date _____