Cape May County Special Services, Transportation Department
PHONE: 609-465-2720 EMAIL: eheitzmann@cmcspecialservices.org AND sdever@cmcspecialservices.org

NAME & ADDRESS OF SCHOOL DEPARTING FROM_____

NAME & PHONE NUMBER OF PERSON IN CHARGE_____

Date of Departure	Time of Departure	Return time to School	Event Name	Destination Name	Destination address, playing field (street, city, zip)	Type of Bus	No. of Riders