

SACRED HEART CATHOLIC ACADEMY

115-50 221st Street

Cambria Heights, New York 11411 Phone - (718) 527-0123 Fax - (718)527-12047 ROMAN CATHOLIC SCHOOLS-DIOCESE OF BROOKLYN

"One in FAITH, to instruct, Instill, and Inspire"

Transportation Registration Form for Sacred Heart Catholic Academy School Year 20_ - 20_

Student(s) Name		
Grade: Date of Birth:		
Student's Home Address Parent's Name: Street Address: Town:		Home Phone: Apt. # Zip Code:
E-mail address:		
Parent Signature:		Phone:
Eligibility for Bus Service:		
Grades K-2: Children must live one half (1/2) mi Grades 3-6: Children must live one mile from sci ROUTED STOPS FOR 20 20		
Stop # Stop Locations	Stop #	Stop Locations
 118th Avenue and 201st Street 120th Avenue and 191st Street 141st Avenue and 219th Street Caney Road and 241st Street 120th Avenue and 191st Street 223		Farmers Blvd. and 143 rd Avenue 116 th Avenue and 196 th Street Guy R. Brewer Blvd. and 132 nd Avenue Bedell St. and 127 th Avenue 120 th Avenue and 180 th Street Guy R. Brewer Blvd. and 121 st Ave Guy R. Brewer Blvd. and 121 st Ave Farmers Blvd and Merrick Blvd 119 th Avenue and 166 th Street
 304 235th Street and 120th Avenue 308 119th Avenue and 223rd Street 309 Sayers Avenue and 172nd Street 310 229th Street and 118th Avenue 311 218th Street and 118th Avenue 405 235th Street and 120th Avenue 407 114th Road and 225th Street 409 213th Street and Hollis Avenue 411 112th Avenue and 219th Street 413 99th Avenue and 196th Street 		603 Mangin Avenue and Hannibal Street 604 Liberty Avenue and Dunlap 608 110 th Avenue and 172 nd Street 609 196 th Street and 110 th Avenue 610 110th Avenue and Dunlap 611 198th Street and 113th Avenue 612 Francis Lewis Blvd and 113th Avenue Dear Parents, This is a complete listing of the stops Available to Sacred Heart students at this time. If you wish your child to ride please
414 104th Avenue and 193rd Street		complete this form, checking the stop you need.



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Student(s) Name:			
Address	D.O.B		
	Grade:	Room #:	
	Phone:		
To whom it may concern,			
I hereby request a bus pass for my child to use on public tra	nsportation to and from scho	ool each day	
My child will be riding the bus which operates on route		_	
Parent's Signature			