

Transportation Request

Event Name	
Training Club Name	
Pick Up Time	
Pick Up Location	
Address	
City/State/Zip	
Emergency Contact Name	
Emergency Phone Number	
Total # Athletes Riding	
Total # Coaches Riding	
Total # Parents Riding	

Please fill in each space completely and accurately. I need the phone number of the individual in charge, so that he/she may be informed of any unexpected turn of events.

Questions about transportation? Contact Emmanuel Lindsay at elindsay@nyso.org or (646) 893-6219. Thanks!