

2026-2027 TRANSPORTATION REQUEST FORM

FOR

OUR LADY OF THE HAMPTONS SCHOOL

Quogue
East Hampton
Sagaponack
East Quogue

Tuckahoe
Bridgehampton
Wainscott
Other _____

*STATE LAW REQUIRES THIS APPLICATION TO BE FILED **BEFORE** APR. 1, 2026*

In accordance with the laws of the State of New York, I hereby formally request transportation for _____ to attend Our Lady of the Hamptons School,
(Name of child)

at 160 North Main Street, Southampton, NY during the 2026-2027 school year on all days this school is in session.

This student is _____ years of age, born on _____ and will enter the Grade _____ in September 2026.

Please provide your personal and home information.

Mother's first and last name _____
Mother's cell and work phone# _____

Father's first and last name _____
Father's cell and work phone# _____

Home Street Address: _____
Home Phone# _____ Email: _____

Please provide emergency contacts information (do not include yourself)

Name _____ Phone# _____
Address _____

Name _____ Phone # _____
Address _____

Parent/Guardian Name (Please print) _____

Signature of Parent/Guardian _____
Date of Request _____