

# Request for Carpool List

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

I would like to (please check one):

Pick up the list from the reception desk (allow 2 days)

Have the list mailed to me at the following address (fill in mailing label below):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

I agree to use this list for the purpose of obtaining carpool drivers only. I will not give these numbers out to anyone.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date