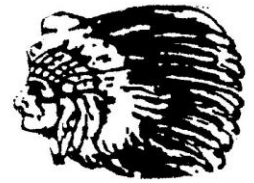




**KENWAL DAY CAMP**  
**100 DREXEL AVENUE**  
**MELVILLE, NY 11747**  
**TEL (631) 694.3399 FAX (631) 694.3841**  
**www.kenwalsdaycamp.com**



Summer 2019

Dear Staff Member:

Time is fast approaching for another season at Kenwal Day Camp. One of the vital aspects of camp life is transportation. We must know **IMMEDIATELY YOUR NEEDS FOR TRANSPORTATION**. If you are driving a camp bus, the bus is your transportation. If you have your own transportation or if you **NEED** transportation, **complete area below, A or B or C**. Please complete and return this sheet **IMMEDIATELY**. Thank-you.

**Gary (The Bus) Mayers TRANSPORTATION DIRECTOR**

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NAME \_\_\_\_\_ AGE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ TOWN \_\_\_\_\_

HOME# \_\_\_\_\_ CELL# \_\_\_\_\_ POSITION \_\_\_\_\_

Please list two **cross streets** nearest your home- \_\_\_\_\_ or \_\_\_\_\_

**A \_\_\_\_\_ I am a camp bus driver**

1. If so your driver's license: State \_\_\_\_\_ ID# \_\_\_\_\_
2. Please attach a **PHOTOCOPY** of your CDL license with this form  
**\*DO NOT COMPLETE ANY OTHER ITEMS ON THIS PAGE\***

**B \_\_\_\_\_ I will provide my own transportation**

1. Would you be willing to form a car pool with other drivers? \_\_\_\_\_ (Yes or No)
2. Would you be willing to give a ride to another counselor in your town, who does not drive? \_\_\_\_\_ (Y or N)
3. Tell us the car you *most often* will drive to camp:

MAKE(ex:"Nissan") \_\_\_\_\_ MODEL(ex:"Pathfinder") \_\_\_\_\_

COLOR \_\_\_\_\_ License Plate # \_\_\_\_\_

**C \_\_\_\_\_ I NEED CAMP TRANSPORTATION**

1. If you had a choice would you prefer to be a bus counselor? YES \_\_\_\_\_ NO \_\_\_\_\_