



**Auxiliary Campus Enterprises & Services, Inc.**  
 Transportation Office  
 Bus Garage – 186 N. Main Street  
 Alfred State College – Alfred, NY 14802-1196

**Bus Reservation Request**

Today's Date: \_\_\_\_\_ Date(s) of Reservation Request: \_\_\_\_\_

Name of Requestor(s): \_\_\_\_\_

Name of Advisor: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Billing to be sent to: \_\_\_\_\_

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

Number of Passengers: \_\_\_\_\_ *If this trip is being billed to a Student Senate club you must provide the approved REQ # to confirm your reservation.*

Date	Pick Up Time	Pick Up Location	Destination

**Bus Reservation Request MUST be in the ACES Transportation Office 10 days prior to date of request.**  
*Email requests to [Transportation@alfredstate.edu](mailto:Transportation@alfredstate.edu)*

- The total cost of trips shall include the hourly rate, mileage, tolls, parking fees, room and board for the driver.
- Departure time will be adhered to by the driver of the bus unless otherwise authorized by the person in charge of the group.
- In the event that your group cancels services without proper notification to ACES Transportation, the group will be liable for payment of fee equal to 4-hours x the hourly rate.
- ACES will not be responsible if the bus service is interrupted due to equipment failure or other unforeseen acts.
- In the event that transportation shall fail to show for your event, please notify the ACES Transportation Office at 607-587-4705 or after hours at 585-808-9114
- The requesting organization will be responsible for any breakage and/or clean up at the discretion of the ACES Transportation Manager.
- All trips will be charged a minimum of 4-hours x the hour rate.
- Use of any drugs or alcohol is prohibited in all ACES vehicles.**
- All student related trips must include a chaperone and provide a cell phone number.**

Requestors Name/Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Advisor/Chaperone Name/Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_