



Bus Reservation Request Form

Request **MUST** be in the ACES Transportation Office **10 days** prior to date of request.

Email requests to Transportation@alfredstate.edu

Today's Date		Requested Date(s)	
Group Name		Requestor Name	
Billing Department			

*** An approved Chaperone must be an advisor/instructor and at least 21 years old.**

Chaperone Name	
Chaperone Cell Phone #	

Trip Details

Departure:

Pick Up Time	Pick Up Location	Destination Address

Return:

Pick Up Time	Pick Up Location	Destination Address

Additional stops:

1. The total cost of trips shall include the hourly rate, tolls, parking fees, room and board for the driver.
2. Departure time will be adhered to by the driver of the bus unless otherwise authorized by the chaperone in charge of the group.
3. ACES Transportation requires 7-day notice for any cancellations. Cancellations made after this may be charged a minimum of 4 hours at the quoted rate.
4. ACES will not be responsible if the bus service is interrupted due to equipment failure or other unforeseen acts.
5. Please notify the ACES Transportation Office at 607-587-4705 or after hours at 585-808-9114 for day of event concerns.
6. The group/organization will be responsible for any breakage and/or cleaning at the discretion of ACES.
7. All trips will be charged a minimum of 4 hours at the quoted rate.
8. **Use of any drugs or alcohol is prohibited in all ACES vehicles.**
9. **An approved chaperone must accompany the group on the bus.** This is for the safety of the group and equipment.

Signature of Requestor		Date:
Billing Authorization Signature		Date: