

Huntington YMCA
60 Main Street, Huntington NY 11743
(631) 421-4242 or on the web @ www.ymcali.org

TRANSPORTATION - FAQ'S

Which camps are eligible to utilize the YMCA busing service?

Campers must be 5-day Full Day Programs only. Camps include Kiddie Camp, Day Camp, Sports Camp, Performing Arts Camp, Teens in Action and Counselors in Training.

What types of buses will be utilized?

Busing service will be provided by Huntington Coach. Mini-buses are available with the capacity of 20 campers. All buses will be air-conditioned for your child's comfort.

Where will my child be picked up? How long will he/she spend on the bus?

Campers will be picked up and dropped off at their homes (door to door service). Depending on bus routes, campers could be on their bus trip for 15 minutes to one hour maximum.

Campers must be picked up and dropped off by an adult at their bus stop within 5 minutes of the scheduled time.

Will there be a YMCA Staff Person as a chaperone?

Yes, the YMCA will be providing a camp staffer on each bus.

Who do I contact if I have a concern or question regarding my campers transportation?

Parents will have contact information from both the bus company (Huntington Coach) as well as for the YMCA Camp Office. It will be important to keep open communication between all parties to ensure a safe efficient process (ex: absentees, time coordination etc.)

Can I register just for drop-off or pick-up instead of both?

To utilize the transportation service, it is mandatory to register for drop off AND pick up. This ensures route consistency and camper safety.

What towns does the YMCA provide bus transportation for?

We are currently offering transportation in Huntington/Cold Spring Harbor, South Huntington, Northport/East Northport, Greenlawn/Centerport, Dix Hills/Melville. If you live outside these designated areas please call (631) 421-4242 ext *146 as the YMCA will be collecting any interest lists for additional locations.

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TRANSPORTATION REGISTRATION FORM

Camper's Name: _____ Birth Date: _____ Grade: _____
Address: _____ Town: _____ Zip: _____
Parent/Guardian Name: _____

Parent 1 Phone Numbers:

(H): _____
(W): _____
(CELL): _____

Parent 2 Phone Numbers:

(H): _____
(W): _____
(CELL): _____

Camp Weeks Desired: (Please Circle Weeks)

Week 1: 6/25 – 6/29

Week 2: 7/2 – 7/6

Week 3: 7/9 – 7/13

Week 4: 7/16 – 7/20

Week 5: 7/23 – 7/27

Week 6: 7/30 – 8/3

Week 7: 8/6 – 8/10

Week 8: 8/13 – 8/17

Week 9: 8/20 – 8/24

Camp Program (circle one): **KIDDIE YOUTH TEEN CIT PERFORMING ARTS SPORTS**

Emergency Contact:

Name of contact: _____
(H): _____
(W): _____
(CELL): _____

Name of contact: _____
(H): _____
(W): _____
(CELL): _____

Camper Pick Up Address
(if different from home address)

Camper Drop Off Address
(if different from home address)

Street: _____

Street: _____

Town: _____ Zip: _____

Town: _____ Zip: _____

Any Special Directions: _____

Any Special Directions: _____

If using the bus stop please circle 1 Location and when you are using the stop

Countrywood Pick up 8:30am AM ONLY PM ONLY BOTH	Silaswood Pick up 8:40am AM ONLY PM ONLY BOTH
TJL Elementary Pick up 8:30am AM ONLY PM ONLY BOTH	

****Please note that there is a 5 day wait period to be added to a bus **
roster if you are using the door to door service**