

CECCHETTI COUNCIL OF AMERICA
International Summer School



Student Transportation Request Form 2024

Airport Shuttle Service for CCA Summer School at Hope College
Holland, Michigan is only available for:

Arrival on **Sunday, July 7** and Departure on **Saturday, July 20**

One-way Transportation Fee \$60.00 and Two-way Transportation Fee \$120.00

- Each participant **MUST** submit a copy of this completed form (even if no ground transportation is required). Print clearly. Complete one airport form for each individual.
- It is advised that student departures do not occur until after 4:00 PM on Saturday, July 20 as the student performance is scheduled for Saturday, July 20.
- Please return this completed form with your payment and all other required paperwork for the CCA Summer School.
- Mail to: Julie Merkle, CCA Summer School, 45819 Winthrop, Macomb, MI 48044
- Email any changes of flight itinerary to: ccajenniferkrueger@outlook.com

*****When making flight arrangements please list your child as an Unaccompanied Minor. A counselor will meet students at the airport to direct them to the shuttle.**

Name: _____	Parent's Name: _____
Attendee's Cell Phone: _____	Parent's Phone: _____
Attendee's Email: _____	Parent's Email: _____
Date of Birth: _____	Name(s) of Emergency Contact: _____
	Emergency Contact's Phone: _____

Are you a (circle one): Student Attendee Chaperone

Circle category which best apply:

I do not require transportation	I require one-way transportation for Arrival	I require one-way transportation for Departure	I require round-trip transportation	Amount Included \$ _____
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*A CCA representative will meet attendee after exiting the gate.

Date of Arrival: _____	Airline: _____
Departing City: _____	Flight number: _____ Departure Time: _____
Connecting City (if applicable): _____	Flight number: _____ Departure Time: _____
Arrival Time at Grand Rapids International Airport (GRR): _____	

Date of Departure: _____	Airlines: _____
Departing City: <u>Grand Rapids</u>	Flight number: _____ Departure Time: _____
Connecting City (if applicable): _____	Flight number: _____ Departure Time: _____
Final Destination: _____	Arrival Time at Final Destination: _____

For office use: Student Chaperone Amount paid: \$ Type of Payment: