



Class Pass Request Form

Complete this form in its entirety and mail or fax it to Tri Delta Transit at least three weeks before your planned trip.

Teacher's Name: _____

School: _____

Address: _____

Phone Number: _____

Best Time to Call: _____

Date of Trip: _____

Starting Point: _____

Destination: _____

Time you want to arrive: _____

Time you want to be back at school: _____

of Students: _____ # of Chaperones: _____ Grade Level: _____

Mail or Fax to:

Tri Delta Transit, Attn: Class Pass Coordinator

801 Wilbur Ave., Antioch, CA 94509

Fax: 925-757-2530