



APPLICATION FOR SCHOOL TRANSPORT

APPLICATION FOR SCHOOL TRANSPORT TERM _____, 20__

____ Change of Address ____ Duplicate Bus Pass ____ New Transport ____ Request ____ New Student ____

Students Surname _____ Date of Birth _____

Students Forenames _____ Male _____ Female _____

Parents/Guardian/Carer Surname-Mr/Mrs/Miss/Ms _____ Forename _____

Relationship to Student _____

Address of Student _____

Cell Phone # _____ Work # _____

(In case of emergency)

E mail Address _____

Bus route (if known) _____ Pick up Area _____

Boarding point _____

All pupils will be expected to abide by the "Code of Conduct". Parents are responsible for their Childs's safety before boarding and after alighting from the vehicle.

I accept the conditions above _____ Date _____ Signature _____

And the "code of Conduct" Signature of Parent /Guardian/ Carer

Print name _____ Grade _____

Once you have completed the details above please hand the form into the school Cashier.

Form of payment: Visa, Bank deposit (circle one)

Receipts # _____

Cashiers Signature: _____

Parents who choose to have their learners to and / or from school on the school bus must purchase a school Bus pass, which is good for the whole term and needs to be carried by the learner.