



APPLICATION REQUEST FOR BUS TRAVEL

LUCINDALE & DISTRICT, NARACOOORTE

Please NOTE this an application only. Print all information clearly and RETURN TO LUCINDALE AREA SCHOOL (dl.0749.info@schools.sa.edu.au)

YEAR OF TRAVEL: _____

Section 1				
Student's First & Surname	DOB	School Attending	Year Level <small>At the time of completing this form</small>	Medical Conditions <small>Your child's bus driver should be made aware of e.g., Asthma, allergies, such as bee sting and other information that is relevant</small>

Section 2
Bus Route:
Distance form nearest Government school:
Pick up / Drop Off Location (if known):

Section 3		
Family Information:		
Parent/Caregiver:	Relationship to child:	Mob:
Other Parent/Caregiver:	Relationship to child:	Mob:

Section 4	
Residential Address: <small>Please supply full details: Grid / Rapid / Key tag number, Section, Hundred, Lot number and other details so we can ascertain exact location. This information is in case of fires or other emergencies</small>	
House Number / Lot:	Street / Road:
Hundred:	Town:
Rural Addressing Number:	
Longitude:	Latitude:

Section 5
Postal Address:

Section 6				
Emergency Contacts:				
<small>Please nominate at least two people who you wish to be contacted in the event of an emergency. Please note: Parents / Caregiver will always be contacted in he first instance unless stated otherwise.</small>				
Name	Relationship	Home Number	Work Phone	Mobile

Section 7

Consent:

Consent to leave student/s at bus stop when parent/caregiver is not at allocated stop for the following student/s:

1. _____
2. _____
3. _____
4. _____
5. _____

Section 8

Naracoorte Bus:

Commitment to pay:

Naracoorte Bus fee per year \$1 800.00

Payment for the Naracoorte Bus is strictly on a termly basis.

The cost term is \$450.00

An agreed payment plan can be organised with the Business Manager before the end of every Week 1 of each Term.

Section 7

Name:

Signed:

Date: