



APPLICATION FOR THE PURCHASE OF SCHOOL BUS PASS

Surname _____ First Name _____

Address _____

Phone _____ School _____

Term [1] [2] [3] [4] [AM] [PM]

Semester [1] [2] [AM] [PM]

Year [] [AM] [PM]

Days Travelling (Little Saints Only) _____

Journey From _____

Journey To _____

Conditions of Issue

- Pass must be shown on entering bus or appropriate fare paid
• This pass is NOT TRANSFERABLE and any illegal use, offensive language and unruly behaviour will not be tolerated and may result in the pass being suspend - no refund
• For use only between the locations specified on the pass
• LOST, STOLEN OR MUTILATED PASSES will be replaced on payment of \$11.00
• No eating, drinking or smoking allowed at any time
• Any person found causing damage to the bus will be prosecuted
• The pass remains the property of the Company

THE FOLLOWING MUST BE SIGNED BY THE STUDENT IF 16 YEARS OR OVER, OR BY THE PARENT OR LEGAL GUARDIAN

I _____ (Print full name) certify that the information supplied on this form is true and correct. I have read the Code of Conduct and the conditions of issue and I understand and agree to abide by them. If I am signing this form as a parent or guardian, I have explained the Code of Conduct and the Conditions of Issue to my son/daughter and he/she understands and agrees to abide by them. I understand that Martins Albury may suspend or withdraw the pass for breaches of the Code of Conduct or Conditions of Issue

Signature _____

Office Use Only

Table with 5 columns and 5 rows: Date, Amount Pd, Rcpt No, Method, Notes



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