

BHCS BUS APPLICATION 2024

Please tick the times needed – fees are half time and full time only, casual bus use is **NOT** available.
Preference will be given to full-time users

PRIORITY USERS
MON-FRI: FULL TIME

OTHER USERS
MON-FRI: AM ONLY

OTHER USERS
MON-FRI: PM ONLY

STUDENT DETAILS

Surname	First Name	Year Level in 2024	Intended date for commencement of travel

Residential Address for the children listed above (1 only per child):

Please list any significant Medical Conditions of which our drivers should be aware for the children listed above:

Name of parent/guardian completing this form:

Daytime Contact Number:

Email Address:

Flexi Travel: 14+ years old only

I give permission for my child, who is 14 years or older, to disembark at stops along their designated bus route, aside from their regular stop, specifically for employment or sport-related reasons. I understand that the information my child provides in these instances cannot always be verified by the driver on the day of the request.

YES NO

Signature:

Date form was completed:

Office Use Only

ROW NAR GEM 1 GEM 2 BOR MON
 BELGRAVE HEIGHTS