If you wish your son / daughter to use the morning bus service, please complete the form below and return it Megan Carter on fax: 086 660 3605 or e-mail carter@stjohnscollege.co.za

Please complete a separate form for each child.

NAME OF PUPIL: _____

SCHOOL: _____

CLASS / FORM: _____

I wish my son/daughter to use the morning bus service from the commencement of Term 1, 2009.

Please indicate which service : North ❑ South ❑ . East ❑ .

Waverley ❑ . The Parks ❑

My child will be boarding the bus at Stop No. _____

CONSENT AND INDEMNITY

1. I, _____ (full names), the undersigned, confirm that I am the parent/legal guardian of the child/ward mentioned above.
2. I hereby make application for my child/ward to be transported in transport provided by the Council of St John's College (St John's)and Roedean School (S.A.) Limited (Incorporated in terms of Section 21 of the Companies Act) ("Roedean") to school.
3. I hereby consent to my school fee account for my child/ward being debited for the termly fee for this service, and I acknowledge that I am obliged to give one half term's notice should I wish to discontinue making use of the service.
4. I fully understand that the transport provided by St John's and Roedean is used and undertaken by my child/ward at his or her own risk.
5. I acknowledge that my child/ward will be under the control of an employee of St John's or Roedean or their agents while using the transport and further acknowledge that neither St John's nor Roedean, nor its employees, nor agents accept any responsibility for any loss, injury or damage that may be sustained by my child/ward while using the transport provided by St John's or Roedean or its agents.
6. I waive any right that I or my child/ward may have to claim compensation against St John's or Roedean, their employees or agents in respect of any loss, injury or damage which may be sustained in the course of my child/ward using the transport provided or arranged by St John's or Roedean, whether as a result of negligence or otherwise and I indemnify St John's or Roedean, their employees and agents against all claims.

SIGNED AT _____ ON _____

AS WITNESSES:

1.

_____ _____

PARENT/GUARDIAN

2.

_____