

Glen Austin High Scholar Transport Order Form 2024

Please note that bus transport is subject to availability

| Collection Mornings Only | Drop Off Afternoons Only | Collection and Drop Of Mornings and Afternoons | |
|-----------------------------|-----------------------------|---|--|
| Please indicate your requi | rements: | | |
| | | | |
| Address for nick up: | | | |
| Full Name of Guardian: | | Cell | |
| Full Name of Father: | | Cell | |
| Full Name of Mother: | | Cell | |
| Student Full Name: | | Grade | |

MORNINGS:

- 1. Pick up times will be between 05h30 and 07h25 depending on the pick-up point.
- 2. The route may be adjusted from time to time and parents will be advised accordingly.
- 3. Please note that pick times may be influenced by traffic flow from time to time.
- 4. Once we have received your application, we will advise you of the route pick up point.

AFTERNOONS:

- 1. Normal time of departure for the bus is between 15:00 and 15:30.
- 2. Drop off times will depend on finalization of the routes as well as traffic influence.
- 3. Where possible parents will be advised of late arrival via our 24hr WhatsApp and Hotline No.
- 4. Changes in the transport collection or drop off times will be communicated

COSTS:

Per Student per month (Mornings Only)R800.00Per Student per month (Afternoons Only)R800.00Per Student per month (Mornings and Afternoons) R1500.00



Terms and Conditions:

- 1. All payments with regards to transport are to be made into the below mentioned bank account with the child's name + surname + bus as the reference. Bank account details are supplied on this form.
- 2. Payments are due in advance and no refunds will be given.

| Bank | First National Bank |
|----------------|---------------------------|
| Account Name | Teffo Remigeo Engineering |
| Account Number | 6283-4360-935 |
| Branch Number | 250-655 |
| Branch Number | 250-655 |
| Account Type | Current Account |
| Reference | Name+Surname+Bus |

- 3. Once payment is made the form must be emailed to transport@glenaustinhigh.co.za. Or Whatsapp No. 0633590288
- 4. No cash payments for transport will be received by GAHS. Only EFT's will be accepted.
- 5. Absolutely no payments/cash are to be given to the GAHS driver.
- 6. Payments are to be made in advance by the 2^{nd} of each month.
- 7. No payment, no transport.
- 8. No credits will be given.
- 9. Should parents wish to cancel transport they must give one month's calendar notice. Please note that no refunds will be given.
- 10. Should any ad hoc transport requests arise rates will be discussed at the time of the request. Students will only be accommodated if the bus is not full and there is sufficient time for an EFT to be made. Please note that these rates will not be standard rates.
- 11. Changes may be made in 2025 with regards to collection times and routes as needed. Parents will be advised of such changes at the earliest possible convenience.
- 12. Any child who is found to misbehave or cause any damage to the bus itself or items on the bus whilst on the bus either during, before or after a trip, will be temporarily suspended from bus transport and parents will be advised of the outcome once investigated.
- 13. Should your residential address change, the availability of the transport service will be reviewed as per the new collection area.
- 14. Transport routes are determined by the school however, accommodation of learners is subject to space availability and geographic location.

With my/our signature(s) I indicate:

- 1. My/our acceptance of the terms and conditions as set out above.
- 2. I/we understand that these may be adjusted/adapted as needed.
- 3. Should my child arrive late at a pick up point I/we will make the necessary arrangements to ensure that my child gets to school.
- 4. Late arrival at pick up points cannot be construed as the reason why a child does not attend school and GAHS does not take any responsibility for late arrivals.

I the parent of(Student Name) have read, understand, agree, and accept the above:

| Full Name of Mother: | Signature | Date |
|------------------------|-----------|--------|
| Full Name of Father: | Signature | Date |
| Full Name of Guardian: | Signature | . Date |