



WESTSIDE CHRISTIAN COLLEGE

PO Box 282
GOODNA Q 4300

Telephone: (07) 3437 9000
Fax: (07) 3437 9010
Email: transport@wcc.qld.edu.au

Transport Requirements for Bus Travel – 2017

Please return signed form to Business Office by **18th November, 2016**

Family Name: _____ WCC A/c No: _____

Residential Address: _____

Suburb: _____ P/Code: _____

Email: _____

(Please PRINT CLEARLY, thank you)

Travel Requirements:

Please tick one of the following usage types

PERMANENT

CASUAL

Student Name	Year Level in 2017	Is this Rail Bus?		Mon		Tues		Wed		Thurs		Fri		Every Day	
		YES	NO	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM

Parent / Guardian Names

1st Person to Contact: _____

Mobile: _____

Relationship to student/s: _____

Phone: _____ H / W

2nd Person to Contact: _____

Mobile: _____

Relationship to student/s: _____

Phone: _____ H / W

Is there any further information we may need to know about your child/ren? _____

Before Transport is confirmed, you must read, complete and sign the form below:

I understand that if my children (Year 5 & under) are not met at the bus stop, or supervised by an older child as nominated below, then they will be brought back to the College and placed into OSH Care at my own expense. I have completed and attached the OSH Care enrolment form for 2017 for all children Year 5 & under (please tick). **OR**

I do not have any Prep to Year 5 students (please tick)

Nomination of Older Child/Sibling Supervision of students who are in Year Level 5 and under in 2017:

As listed on the above table, my child/ren who are Year Level 5 and under, will be escorted to and from the bus stop by:

(Student's name) _____ (Year Level) _____

Signed (parent/guardian) _____ **Dated** ____ / ____ / ____

Transport Office Use Only

Rte	Pass L	Man	AM	PM
A/C	A.St	Ltr	Dr	Zone