

School Bus Reservation Form

PLEASE RETURN THIS FORM TO THE BUS CO-ORDINATOR WHO OPERATES YOUR CHOSEN ROUTE. Bus co-ordinators are listed on the school website at www.leicestergrammar.org.uk or alternatively, contact the School reception to find out the name and address of the co-ordinator for your chosen route

*Please indicate whether this is a **New Request** or an **Amendment to current details**
(delete as applicable)*

Name of Child Male / Female
(NB: Please complete a separate form for each child)

Name of Parent or Guardian: Dr/Prof/Rev/Mr/Mrs/Miss/Ms

Address

.....

..... Postcode

Home Telephone No. Daytime Telephone No.

E-mail Address

Child's Date of Birth

Bus Route No. Pick up Point

Term and year from which you require transport

Travel required: am only / pm only / return journey *(delete as appropriate)*

For use by bus co-ordinators only