## APPLICATION FOR REPLACEMENT BUS PASS

## TRANSPORT FOR NSW APPROVED REPLACEMENT FEE \$15 inc. GST PART A TO BE COMPLETED BY PARENT/GUARDIAN 1 STUDENT'S NAME Given Names Surname 2 STUDENTS **HOME ADDRESS** Postcode Phone 3 SCHOOL Year It is a requirement that Bus Passes be shown when boarding the bus. Bus Passes are NON-TRANSFERABLE. Students who obtain a replacement pass and give, loan or sell it to another student will have the matter referred to the school and rights to free travel withdrawn. If there are any circumstances which should be taken into account in issuing a replacement pass, please contact the office. I hereby declare that the Bus Pass previously issued has been 4 DECLARATION (Lost/Stolen/Destroyed/Mutilated/etc.) If the Bus Pass should be recovered I undertake to destroy the original pass. SIGNATURE DATE PARENT/GUARDIAN Replacement passes may be obtained by either:-1. Giving this completed form to the driver with \$15 payment (see options below). 2. Calling at the company's office between 8:30 and 4:30 weekdays. 3. Sending this completed form to the address below with a cheque or credit card details. 4. Email the completed form with credit card details to info@lithgowbuslines.com.au 5. Ringing our office between 8:30 and 4:30 weekdays on the phone number shown below. Payment method: Cash Cheque Credit Card Credit card payment 7 Visa Card Mastercard number Cardholders Name: Expiry date: Amount \$15.00 Signature: Daytime phone no: inc. GST 24 Donald Street Lithgow NSW 2790 ithgow A member of the Buslines Group Buslines Group Pty Limited ABN 99 000 016 339 Phone: 6352 3888 BUSLI PART B OFFICE USE ONLY 5 DRIVER'S NAME SHIFT NO. PART C Name and school to be completed by parent where form and fee is to be given to the driver. INTERIM RECEIPT/PASS (To be shown on boarding until replacement pass issued) **6** STUDENT'S NAME Given Names Surname



DRIVER'S SIGNATURE

**SCHOOL** 

DATE