



*St. Joseph's School*

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## **BUS TRAVELLING FORM**

(Students without permits)

Name of child/children: \_\_\_\_\_

Address: \_\_\_\_\_

My child will be travelling on the bus to \_\_\_\_\_

With (name of student) \_\_\_\_\_ on date/time \_\_\_\_\_

Signed parent \_\_\_\_\_ Principal \_\_\_\_\_