

Transport Application

Name:	Class:	
Age:	Gender:	
Street Address:		
	BUS FEES	
NUMBER OF DAYS	ONE WAY	TWO WAYS
3	AED 350	AED 500
4	AED 450	AED 700
5	AED 550	AED 900
Please ensure:		
 Punctuality to avoid unr Ensure the child is colle Ensure to collect all child Parents should provide to 	cted at drop-off time. ld's belongings at drop-off tim	e.
I hereby authorize my child	to use the	e Nursery's transportation
facility. Acknowledging that t	he nursery will not be held liable	for any injury incurred to my
child	Whilst on the bus and /or o	lue to an accident.
Parent Name / Signature		Date: