

travel with

CONFIDENCE

**BUS & COACH
HIRE LTD.**

30 Spalding Street, Leicester, LE5 4PH Phone: 0116 276 2171

Application Form for a Confidence Bus Pass 2016-2017

(Please complete the form using **BLOCK CAPITALS**)

PARENT DETAILS:

Parents Name: _____ Title: _____

Address: _____

Post Code: _____

Email Address _____

Telephone: Home _____

Work _____

Mobile _____

Period of Pass: **Annual / Autumn Term 1st Half / Autumn Term 2nd Half /
Spring Term 1st Half / Spring 2nd Half / Summer Term 1st Half /
Summer Term 2nd Half** (delete as applicable)

Please ensure that this application is received at least 3 weeks before the pass commencement date.

Please issue a Confidence Bus Pass for my son/daughter. I understand that the pass will not be issued until payment is received. By signing, I understand and agree that this pass is issued subject to the Confidence Bus & Coach Co Ltd. Terms and Conditions, copy available on request.

Signature of Parent / Guardian: _____

Date: _____

STUDENT DETAILS:

Male/Female (M/F): _____ Date of Birth ____/____/____

Name: _____

School / College / Academy attending: _____

Route No. Requested: _____ Pick-up Point: _____

Address (if different from applicant): _____

Post Code: _____

If requested, the Bus Pass will be posted to the address of the applicant. Please include a stamped addressed envelope. Otherwise, the Bus Pass will be issued by the Bus Driver on the first day of travel, providing that full payment has been received.

I have enclosed a stamped addressed envelope: Yes / No (delete as applicable)

I have included a photograph of my son/daughter with this application form.

Any student caught abusing the Bus Pass system will forfeit the right to travel with Confidence Bus and no refunds will be given.

Please ensure that all students are at their pick-up point 5 minutes prior to the published pick-up time

(Please use one form per student)