CHANGE OF BUS SERVICE SCHOOL YEAR 2023/24



I		(Parent's name and surname)
declare that my child		(Child's name and surname)
Class	Teacher	
WON'T BE USING THE BUS on	1 1	(Date)
○ each Monday ○ each Tuesday	O each Wednesday	○ each Thursday ○ each Friday
I therefore give authorisation to		(Name and surname)
to collect my child from school.		
Date	Parent's Signature	J
*copy of the ID/passport of the authorise	ed person has to be attac	hed unless it has already been submitted.