



# Maa Ganga Vidyalaya

Senior Secondary (Commerce) Recognised & CBSE Affiliated  
Kh. No. 520, Rajokri, New Delhi – 110038

## TRANSPORT FORM

(USE CAPITAL LETTERS ONLY)

Admission No.....

Please affix a recent  
Colored photograph  
of the child

We request that our son/daughter/ward whose particulars are given below may be permitted to use the school bus for between.....and **Maa Ganga Vidyalaya** w.e.f. ....

I wish to use school transport

I do not wish to use school transport

### Family information

Last Name                      First Name

Gender M  F  Date of Birth

Age   Class   Section

Residential Address:

Residence:             Office No.:

Mobile no:             Emergency/Mobile:

### CONDITIONS

1. We will pay according to the rates in force for the time being.
2. We understand that it would be our responsibility to drop and pick-up our child at/from the specified bus stop.
3. We accept that the bus facility is extended to our ward at our own risk and responsibility.
4. We understand that our ward will be allowed to travel in the bus only if seat is available on the route.
5. We have read and do hereby consent to the terms and conditions regarding transportation.

Signature of Mother/Guardian

Signature of Father/Guardian