

TRANSPORT FORM

Admission No. :

To,
The Chief Learning Officer,
Little Millennium
Kereguddadahalli
Bangalore

Sub : Request or arrangement for Transport

Sir/Madam,

I, S/o. D/o. W/o. residing
at undertake and
confirm that my son/daughter/ward (name) will like
to travel by transportation provided by the school from the date of to (or any other
dates that may be arranged by the school).

I confirm that fully understand the nature of the travel by transportation that my son/daughter/ward will be travelling in and I further confirm that I am fully aware that my son/daughter/wards travel is : he facility provided by the school on my request involves certain amount of risk (including but not limited to sustaining personal injuries and/or loss of life) My son/daughter/ward understands that he/she will have to cooperate fully with the School and he/she undertakes to diligently comply with all safety instructions.

I hereby irrevocably undertake that I shall not hold school it's staff, officers, faculty, students, any other relevant personnel or any of its authorised agents responsible for any damage to or loss of property or any injury or loss life which may be sustained by my son/daughter, ward during travel by transportation provided by the school or arising from any cause in connection with the travel by transportation provided by the school where such damage to or loss of property or any injury or loss of life is not caused by the willful default of school, it's staff, officers, faculty, students or any other relevant personnel.

Signature :

Signature :

Name of the Father :

Name of the Mother :

Date :

Date :