Bus Registration Form



Please hand in one	form per child.				
Name of parent(s)					
Address (Physical	Address - Estat	e, Road, Hous	e or Compound	Number)	
Telephone private			Telephone office		
Email					
I hereby register my child of class of class from the DSN school bus transport services as indicated below: (Kindly tick appropriately					
Registration for Pick-Up Drop-Off	Monday	Tuesday	Wednesday	Thursday	Friday
Starting from		(date)			
Date and signature of legal guardian:					
Bus departure tim Bus departure tim	-	-	1.30pm, 3.35pm 1.15pm (no lunc	-	
For official use onl	y:				
Your child will be p Dropping off occu			_		
Important: Please inform our He 0723314488 if your of waiting at the mention to proceed if a child in	child will not be ta oned time. Due to	king the bus as p	olanned. Your child	is expected to be	ready and

Deutsche Schule Nairobi German School Nairobi P.O. Box 978 00621 Nairobi, Kenya Phone: +254 (0) 733 445685

+254 (0) 721 258417

Email: transport@germanschool.co.ke