



TRANSPORT FORM

Admission No:

TIS / / 20

Name of the student: First Name:

Middle Name:

Last Name:

Grade:

Academic Year

I/We hereby request **Trivandrum International School** to provide daily transport to my previously mentioned ward to attend the school. I/We have apprised my/our self of the current transport routes run by the school. Nearest pick up / drop, point preferred by me/ us is

Land Mark:

In case, the school transport did not cover this point or if the school transport ceases to ply to this point, I/ we will arrange to pick up/drop my/our son/ward at the nearest stop advised by the school. I/ we undertake that my/our child/ward shall abide to and follow all the Rules, Regulations, Do's and Don'ts as prescribed and may be prescribed by the school from time to time. I/ We understand that all reasonable safety precautions are followed by the school. I/ We do release, absolve, indemnify, and hold harmless **Trivandrum International School** their officers, employees, directors their agents, representatives, or assigns. (I/ We) hereby waive all claims, liabilities, and/ or suits against the **Trivandrum International School** officers, employees, directors, their agents, representatives, or assigns, for any injury to(my/ our) (child/ward) or any loss due to the use of such transport.

I/ We agree to pay the school the Transport Fee prescribed by the school and I understand that this is an annual charge.

PLACE

PARENT'S SIGNATURE

DATE

NAME IN CAPITALS:

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