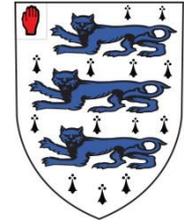




**THE THOMAS ADAMS SCHOOL, WEM**  
 Incorporating  
**ADAMS COLLEGE SIXTH FORM CENTRE**  
**ADAMS HOUSE (BOARDING)**



**TRANSPORT APPLICATION SEPTEMBER 2021**

Student's Name:

Form:

\_\_\_\_\_

Bus Route:

Pick up/drop off point: .....

\_\_\_\_\_

Parent/Guardian's Name:

Address:

Telephone number: .....

Email address: .....

\_\_\_\_\_

- Yes, I wish to reserve a seat on the bus route detailed above for the named student from September 2021 to July 2022. I agree to the terms and conditions set out below.
- No, I do not wish to reserve a seat for September 2021.

\_\_\_\_\_

1. The seat is booked for the whole of the academic year. If the student no longer requires the seat, all charges remain due in full. However, if notification is made in writing and the seat can be sold to another student, a pro rata reduction will be considered.
2. At the end of the year the parent/guardian will need to reapply to confirm the seat for the following year.
3. A £50 deposit is now payable to reserve a seat. The remaining amount becomes due on the allocation of the seat. The deposit will be returned only in the event that no seat is available.
4. Failure to sign this agreement will result in the seat being withdrawn.
5. The School reserves the right to refuse a seat or withdraw the offer of a seat to a student without notice.

I agree to pay any charges being made for the seat.

For payment of the £50 deposit I enclose cash / cheque / have paid via ParentPay / have paid via bank transfer; sort code 30:97:62; account number 58364760 (Please delete as appropriate)

Cheques should be made payable to Thomas Adams

Signed .....

Full Name.....

Date.....

PLEASE RETURN THIS FORM TO THE FINANCE DEPARTMENT AT THOMAS ADAMS SCHOOL

Low Hill, Wem, Shropshire SY4 5UB Telephone: 01939 237000

Email: [clc@thomasadams.net](mailto:clc@thomasadams.net)