

NEW RIDER OLD RIDER

NAME OF SCHOOL : Oryx International School
SCHOOL YEAR : 1920 /21

STUDENT INFORMATION

No.	Last Name	First Name	Grade	Gender	Start Date
1					
2					
3					
4					
5					

PARENTS INFORMATION

Name	Email	Mobile & Home Phone Number
FATHER		
MOTHER		
EMERGENCY CONTACT		

PAYMENT METHOD

<input type="checkbox"/> PERSONAL (CHEQUE <input type="checkbox"/> or BANK TRANSFER <input type="checkbox"/> Please make the cheque payable to: NEW IMAGE BUILDING SERVICES GULF STATES, LLC. Please ensure transfers include the students name	<input type="checkbox"/> EMPLOYER <hr/> Corporate sponsored parents will be invoiced directly unless employer submits "Letter of Approval" for payment
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PICK-UP / DROP-OFF INFORMATION

AREA NAME	
NEAR LANDMARK	
COMPOUND / BUILDING:	
VILLA NO / APT. NO.	

IF NECESSARY, PLEASE DRAW OR SKETCH A MAP OF YOUR EXACT LOCATION ON SPACE PROVIDED, OR ATTACH A MAP (FROM GOOGLE MAP PRINT OUT)

MEDICAL CONDITION

DOES YOUR CHILD HAVE A MEDICAL CONDITION?

YES NO

IF YES, PLEASE EXPLAIN:

ACCEPTANCE RECEIPT

This is a transport contract for individuals which is subject to the relevant provision of the commercial law and laws of Qatar, transportation terms and conditions are not subject to negotiation.

I, (parent's full name) _____, hereby acknowledged that I have completely read and understood the school transportation enrollment package and agree to accept and comply with these regulations. I further acknowledge that I have communicated these regulations to my child(ren), particularly the bus behavior guidelines. also, I hereby accept full responsibility of full semester payment of bus fees regardless to how many times my child used the bus service and/or should I fail to inform New Image Building Services Gulf States, LLC. of cancellation prior to start of bus service. should this application be accepted by New Image, I hereby authorized the company to provide transportation serve as communicated.

PARENT'S FULL NAME	SIGNATURE	DATE SIGNED

FOR OFFICIAL USE ONLY:	RECEIVED BY	DATE	REMARKS
BUS NO.	PICK-UP TIME:	DROP-OFF TIME	P/U &D/O LOCATION