

Amanda Bus

FORM FOR AFTER SCHOOL ACTIVITIES

Student's first name and last name:

After school activity: Year group:.....

Signature: father/mother/guardian:..... Date:.....

WEEKLY OVERVIEW	ACTIVITIES BUS STOP 17:25	BUS ROUTE/NUMBER
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		

EXTRA INFORMATION:

Personal details and information given to us through this form, in line with the Spanish Organic Law of Data Protection (15/1999 of December 13), will be included in a file owned by Gerardo Lucas Cubas Mateo (Amanda bus) in order to obtain a seat on the bus. Furthermore, we would like to inform you that your information could be shared with legally-obliged Public Administrations as well as the insurance carrier contracted by the bus company to cover the risk of accident on the school bus. If you have any change in your details, please inform us in writing.