





Glen Austin House Scholar Transport Application Form 2025

Student Full Name:	•••••	Grade	
Address for pick up:			
	Bus Transport is subject to space ava	ilability and geographic location	
Collection	Drop Off	Collection and Drop Off	
Mornings Only	Afternoons Only	Mornings and Afternoons	
NB. T	ransport is paid in full every n	nonth from January to December	
Per Student per month (Me	ornings Only) R800.00		
Per Student per month (Af	fternoons Only) R800.00		
Per Student per month (Me	ornings and Afternoons) R150	0.00	
Monthly Payments are d	Advance payment disc ue in advance (Before you us	ount: 7% annually se transport) and no refunds will be given.	
Bank	First National Bank		
Account Name Account Number		Teffo Remigeo Engineering 6283-4360-935	
Branch Number	250-655		
Account Type	Current Account		
Reference	Name+Surname+Bus		
Once payment is made the	POP must be emailed to trans	sport@glenaustinhigh.co.za.	
or Whatsapp No. +27 (0)6	3 359 0288		
Declaration:			
I the parent of		(Student Name) have read, understood,	
agree, and accept the terms www.glenaustinhigh.co.za		the Glen Austin Transport Website:	
Full Name of Mother:		Cell	
Signature		Date	
Full Name of Father:		Cell	
Signature]	Date	
Full Name of Guardian		Cell	