

School Transport Services LLC

STS-CS-1-F-01

Student Registration

School Name:			
Name of Student:			Upload Photograph
Student ID No.:			(JPEG format)
Grade / Year:	Section:	Nationality:	
Date of Birth:DD/MM/YY		Gender:	
Service Start Date:	Medica	Condition / Allergy (if a	ny):
RESIDENCE DETAILS:			
Emirate:	A	\rea:	
Nearest Landmark/ Pick-u	p Point:		
Location Latitude (X):	ι	ocation Longitude (Y):	
Parent / Guardian Name:			
P. O. Box Hou	se/Building/Villa No:	Street:	
Makani No.	(Issued by Dubai	Municipality/Applicable only for	Emirate of Dubai)
E-mail:	A	Iternate E-mail:	
Office No:	Residence No:	Emergency No:	
Father's Mobile:		Mother's Mobile:	
I have read and understoo the clauses stated therein.	d the Terms and Conditi	•	Transport Services and agree to
			fice Use Only
);
Parent's Signature	Date		