

**PLEASE, FILL OUT THE 3 FOLLOWING FORMS AND RETURN THEM  
TO THE LYCÉE UPON RECEPTION  
BY MAIL, OR EMAIL to: [Corinne.nash@lft.ca](mailto:Corinne.nash@lft.ca)**

**TERMS & CONDITIONS FOR TRANSPORTATION SERVICE**

*Parents are to review the following conditions with their children before using the LFT/ Magic Bus service.*

1. The Magic Bus Company nor the LFT will be liable for delays caused by accidents, breakdowns, detours, bad highway conditions, snowstorms, traffic congestion, or any other conditions beyond our control, and cannot guarantee the specified time of arrival or departure. The Magic Bus Company and LFT will, nevertheless, endeavour to maintain the published schedule.
2. The Magic Bus Company and LFT are only responsible to deliver children to the assigned pick up and drop off addresses.
3. Any damage to the interior or exterior of equipment which is caused by any LFT passengers shall be the responsibility of the students and their families, including the cost to the carrier for repairs, and loss of service due to such damage. The students will be responsible for the general cleanliness of the bus while on route and at drop off, failing this, an additional cleaning fee will be assessed to the student's caregivers. Payment due upon receipt.(payable to Magic bus)
4. Students are required to sit during the whole trip and avoid any noise that would disrupt the bus driver and jeopardize the other students' safety.  
The driver, with the agreement of the supervisor and after contacting the parents/guardians, has the right to deny transportation to any disruptive person who is abusive, poses a safety hazard to other passengers. There will be no refund.
5. It is agreed that neither the Magic bus Company, the Lycée Français de Toronto, or supervisors, directors, officers, employees or agents, will be liable for any injury, damage or loss to the person or property of my said child. Accordingly, both my child and I recognize the need for acceptable behaviour at all times, and I support the school in its behaviour requirements.
6. Penalty fees will be charged to your account for late pick-up

school bus (downtown line)	After 5.30pm (students will wait at the Kelly Library)	\$1 per minute/ child
Shuttle bus	After 3.45pm (driven back to school)	\$10 penalty fees
Shuttle bus	After 5pm(Students will wait at the subway station)	\$1 per minute/ child

I recognize that a risk of injury or potential health risk may be involved in participation in the above named program. I hereby assume such risk of injury or health risk for the above-named person for whom I am in law responsible and I assume full responsibility for risk willingly assumed, and I therefore hereby release and forever discharge the Lycée Français de Toronto and the Magic Bus Company for all actions, damages, claims and demands whatsoever arising by reason of participation in the program or any of its associated activities.

I have read and understood and agree to the contents of this consent entirely.

**Signed at,**.....

**On,**.....

**Student Name:**

\_\_\_\_\_

**Parent/Guardian Name:**

\_\_\_\_\_

**Student Signature:**

**Parent/ Guardian Signature:**

<b>PARENTAL AUTHORIZATION FOR MEDICAL TREATMENT</b>
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I, the undersigned ....., give permission to the physician selected by the Lycée Français de Toronto to hospitalize and secure proper treatment for, and to order injections, anaesthesia or surgery for my child  
..... in the case of surgical emergency, and if I/we are not immediately available for consultation.

**Parent's signature**

**Date**

**Parental authorization for pick-up at assigned location**

I hereby authorize:

1- \_\_\_\_\_

2- \_\_\_\_\_

To collect my child at the assigned pick-up/ drop-off location.

**OR**

I hereby authorize my child to go back home **alone**, from the pick-up/drop-off Magic Bus location, that means **without the help of any guardian's supervision.**

**Date**

\_\_\_\_\_

**Parent/ Guardian Signature:**

\_\_\_\_\_

\_\_\_\_\_

**REGISTRATION FORM : SCHOOL TRANSPORTATION**

**SCHOOL YEAR 2010-2011**

Please fill out the form and return it with a cheque payable to « **Lycée Français de Toronto** »  
**Please be aware that a limited number of seats are available. First come first served upon payment.**

**Registration Deadline ; Monday, June 7<sup>th</sup>**

**I, hereby                      Parent 1).....**

**Parent 2) .....**

**Address :**  
.....

**E-mail :**

**Tel :** Cell.....

Work.....

Home.....

I accept that I have read and understood the contract regulating school transportation and promise to respect it.

I would like to register my children for the LFT transportation:

1).....grade.....

2).....grade.....

3).....grade.....

I am making the following payment :

Service **downtown** : \$ 600 per child                     

Service **St Clair West** : \$ 250 per child                     

**Parent/guardian signature :**

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