



CORNWALL HILL COLLEGE

Nellmapius Drive, Irene | PO Box 621, Irene, 0062, Republic of South Africa
Tel +27 12 667 1360 | E-mail: info@cornwallhill.org | www.cornwall.co.za

BUS SERVICES 2024 (Grade 1 - 12 only)

Please see the Bus Services and routes that are currently available. Should you wish to apply for these services, please complete the form below and email it to accounts@cornwallhill.org

The Bus Services are only operational in the mornings and there are limited seats available. All fees are payable in advance per month and will be billed to the school fee accounts over 10 months.

THE ROUTES

Blue Valley/ Valley View (Driver – Patric Mthimunye)

Departure at 06:20 am from Brooklands Estate – Bus 1

Departure at 06:35 am from Valley View Estate – Bus 1

Departure at 06:45 am from Blue Valley Estate – Bus 2

to Cornwall Hill College (no late departure due to heavy traffic in the area)

Eldo 3 (Driver – Trevor Farley)

First stop 06:25 am at Mulders Mile, Eldoraigne

Second stop at 06:35 am at the Gautrain Station in Centurion

Rooihuiskraal (Driver – Jonas Mahlangu)

First stop at 06:35 am at The Reeds Spar

Winmore (Driver – Derik Visser)

Collection at 06:40 at Winmore KwikSpar

Woodlands (Driver – Derik Visser)

Collection at 06:30 at Woodlands McDonalds

Centurion Golf Estate (Driver – David Kutu)

Departure at 06:50 from Centurion Golf Estate gate

BUS - PATRIC MTHIMUNYE Contact: 012 667 1360 /083 790 1307 p.mthimunye@cornwallhill.org			
BUS ROUTES	ANNUAL FEE	MONTHLY FEE FIRST CHILD	MONTHLY FEE PER SIBLING
BLUE VALLEY / VALLEY VIEW	R 5 330	R 533	R 483
ELDO	R 4 710	R 471	R 421
ROOIHUISKRAAL	R 4 710	R 471	R 421
WINMORE	R 4 370	R 437	R 387
WOODLANDS	R 4 710	R 471	R 421
CENTURION GOLF ESTATE	R 2 530	R 253	R 203

BUS SERVICES APPLICATION 2024

PUPIL NAME & SURNAME	
PUPIL'S MOBILE NUMBER	
STUDENT NUMBER	
PARENT NAME & SURNAME	
HOME NUMBER	
WORK NUMBER	
MOBILE NUMBER	
EMAIL ADDRESS	
BUS ROUTE REQUIRED	
BUS STOP REQUIRED	

All bus fees will be charged to your school fee account per pupil.

NOTIFICATION OF INDEMNITY

I/ we, _____ ID number: _____

being the parent(s)/ guardian(s) of _____

ID Number (Pupil): _____ hereby indemnify, hold harmless and absolve the Principal, the Staff and Cornwall Hill College (the Non Profit Company), acting in good faith as agents of the Board of Cornwall Hill College, against all claims whatsoever as may arise from accident or injury or death to, or any loss or damage to the property of, the above named pupil, that may occur whilst on School premises or as part of an official School function, activity or visit away from the School or making use of the College Bus Services, arising there from or in consequence thereof.

The Principal and Staff of Cornwall Hill College will act *in loco parentis* and at all times will exercise such behavior towards the above named pupil and exercise such control as is consistent with that of a reasonable parent. No responsibility by the Principal or Staff, acting as agents of the Board of Cornwall Hill College, can be taken for injury, death and accident that occurs as a result of a breach of School guidelines, rules and regulations as and where perpetrated by the above named pupil.

I/ we the undersigned, agree that in the event of the above named pupil requiring emergency medical attention, which may or may not involve the administration of an anesthetic and an operation by a suitably qualified medical practitioner/ specialist, due permission and authorisation may, in such instances, be given by the Principal or any other member of the Staff authorized so to do. Such a decision will be made on the clear understanding that the person providing the necessary consent is acting *in loco parentis* and acting as a responsible parent in giving the approval.

Notwithstanding the above provisions, approval of this Notification of Indemnity does not in any way remove or deny pupils or parent(s)/ guardian(s) those safeguards that are afforded according to the laws of South Africa, under whose jurisdiction, to the exclusion of all others, this Indemnity pertains.

I/ we, the undersigned, agree that no refund will be processed should the pupil not use the bus service on certain days including school holidays and camps.

I, the parent/ guardian, shall be responsible for the payment of any medical and/ or hospital accounts, where applicable should an injury or illness be sustained for whichever reason. Cornwall Hill College has public liability cover as well as cover via ISASA.

The staff of Cornwall Hill College and the designated driver(s) do the necessary safety checks and all precautions are taken to ensure the safety and well-being of everyone.

Signature (parent/ guardian): _____ Date: _____