



LC Dysons Bus Services Pty Ltd
 18-20 Moloney Drive Wodonga VIC 3690
 Phone: (02) 6056 3100 Fax: (02) 6056 1623
 Email: wodonga@dysongroup.com.au

QUOTE
 BOOK

CONTACT DETAILS

Customer Name: _____ Purchase Order #: _____
 Name of School: _____
 Postal Address: _____ Postcode: _____
 Telephone: _____ Fax: _____ Email: _____

PASSENGER INFORMATION (number of passengers)

Adults: _____ Children: _____ Grade/Year: _____ 3 children to a seat? _____
 Please note that due to various seating plans, 3 primary school children are able to occupy one double seat. This only applies to primary school children and for travel within the Wodonga/Albury town boundaries.

BUS/COACH REQUIREMENTS (please tick)

School Bus (up to 57) Air Conditioned Wheelchair No of Buses: _____
 Coach (up to 57) Mini Bus (up to 32) Seat Belts No of Coaches: _____
 Please advise details of items to be carried (e.g. one suitcase per person or band equipment)

Luggage space on most vehicles is restricted, Dysons will not provide additional vehicles if luggage does not fit in the luggage bins. Luggage trailers are available on some buses and will be provided on request at an additional fee. Dysons accepts no responsibility for any damage caused to items that are carried

TRIP DETAILS (PICK UP)	TRIP DETAILS (RETURN)
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Departure Date: _____
 Departure From: _____
 Address: _____
Full address of 1st departure point and additional information that may assist drivers finding you (e.g. Main carpark on Smith Road next to McDonalds)
 Departure Time: _____
Actual departure time from 1st pick up point. Please note that our driver(s) will be instructed to depart at this time.
 Destination(s) _____
 Place Name: _____
 Address: _____
 Place Name: _____
 Address: _____
 Address: _____
Unless specified above, our driver(s) will be instructed to travel to the designated destination only. Non-scheduled stops will only be permitted by prior arrangement. Dysons reserves the right to refuse instructions that are not on the driver(s) running sheet

Departure Date: _____
Actual departure time. Please note that our driver(s) will be instructed to depart at time. Dysons reserves the right to re-schedule if time of departure exceeds 10 minutes.
 Departure Time: _____
 Pick Up Point(s): _____
 Place Name: _____
 Address: _____
 Place Name: _____
 Address: _____
 Final Destination: _____
Unless specified above, our driver(s) will be instructed to travel to the designated destination only. Non-scheduled stops will only be permitted by prior arrangement. Dysons reserves the right to refuse instructions that are not on the driver(s) running sheet

Is the bus/coach required to stay with the group? <input type="checkbox"/> YES <input type="checkbox"/> NO	Price Quoted (per bus): _____ Booking #: _____
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Notes: _____

