

Community Bus Declaration

Please P	rint Clearly						
	ISATION DETAILS						
Address	5:						
Suburb:	Suburb:Postcode:						
Land line number:				Mobile:			
Email: _							
	DETAILS						
	5:						
Suburb:Postcode:							
Land line number: Mobile					1obile:		
	Birth:						
	Licence No:				es: / /	′20	
l intend	tick one these opt I to use the City Li t intend to use the I, the above me and Conditions	nk and/ e City Lir entionec and und	nk and/or Ea I driver, hav lerstand tha	st Link syster	Council's Co be observe	d at all the t	
Signatu	re:			Date:			
		DATE	S OF HIRE C	OVERED BY	THIS DECLA	RATION	
Janu	Jary		February			March	
Apri	1		Мау			June	
July			August			September	
Octo	ober		November			December	
25 Fe Sout Lock	ncil Offices erres Boulevard h Morang VIC 3752 ed Bag 1 doora MDC VIC 3083	Fax 03 TTY 13 Email ir	3 9217 2170 3 9217 2111 33 677 (ask for 9 nfo@whittlesea.vic.gov. hittlesea.vic.gov.	vic.gov.au	£:2:2 Free عربي قوبة Italiano Македонски شتات	9679 9871 Hrva 9679 9857 Ελλr 9679 9874 Türk	ηνικά 9679 9873 içe 9679 9877 -ngữ 9679 9878

普通话

9679 9876 Other

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ABN 72 431 091 058