

DAY TRIP PARENTAL CONSENT FORM

Title of Trip: L6th Geography Field Trip to Christchurch Bay, Dorset – Tuesday 25 September 2012

Name of pupil

House

I consent to my son taking part in this Geography Field Trip.

I understand that the charge of £ 15.00 will be added to the end of term bill.

I accept that the School reserves the right to send him home at our expense if he jeopardises his safety, the safety of others or the good name of the School.

Signed

Print name

Date:

Medical and Emergency Contact Information:

We will rely on the information on the school database unless you notify us otherwise in the space below.

Medical:

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Emergency Contact Number:

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Please return this form to iCF Tuesday 18 September via your son or by email – Thank you.