

**DAY TRIP PARENTAL CONSENT FORM**

**Title of Trip:** *The Comedy of Errors*

**Location:** Abingdon School

**Date:** 24/02/15

Name of pupil: .....

House: .....

I consent to my son taking part in the above activity.

I understand that the £7 charge for this will be added to the bill.

Signed .....

Print name .....

Date: .....

**Please return this form to: Miss E Williamson  
Masters' Common Room by Friday 13 February 2015**