

**DAY TRIP PARENTAL CONSENT FORM – 6<sup>th</sup> Form With Alcohol**

**Title of Trip: Sixth Form Literary Dinner, St Helen’s School**

**Date of Trip: Wednesday 15 October 2014**

Name of pupil .....House .....

I consent to my son taking part in the Literary Dinner

I understand that a charge of £15 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.

**Consumption of alcohol** – please delete one:

- Because he will be driving, or for other reasons, my son may not consume alcohol.
- My son may consume alcohol in moderation, under the supervision of the adult supervisors on the trip and only with a meal.

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:** *Rachel Yarrow (Head of English)*  
**a.s.a.p.**