DAY TRIPS: Parental Consent Form (with Alcohol)

Number (please fill in):

Date:

Name (and signature if hard copy):

DAY TRIPS: Parental Consent Form (with Alcohol)
TRIP: Joint Literary Society Dinner DATE: Wednesday 30 November
NAME OF PUPIL:
HOUSE:
Parental Statement
I consent to my son taking part in the above dinner.
I understand that there will be a charge of £15.00 for this dinner.
I accept that the School reserves the right to send my son home at my expense if he jeopardises his safety, the safety of others or the good name of the School.
I give permission for my son to consume alcohol, under supervision, with a meal and in accordance with the School rules and make arrangements to ensure that he does not drive himself home from the event.
I will be collecting my son from school. / I am happy for him to make his own way home. (Please delete as appropriate.)
Medical and Emergency Information*please delete as appropriate
The medical details held by the School are up to date: YES/NO* • Any updated medical information follows (please fill in):
The Contact phone numbers held by the School are up to date: YES/NO* • New Number (please fill in):
In the event of a parent not being available the following emergency contact should be used: • Name (please fill in):

Please return to: Joanna Bridgeworth (Head of English) by: Friday 4 November 2016 If returning parental consent electronically please attach/insert this to your email.