

DAY TRIPS: Parental Consent Form

TRIP: Oxford Utd vs Bolton

DATE: 7 January 2017

NAME OF PUPIL:

HOUSE:

Parental Statement

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

I understand that there will be no charge for this trip.

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.

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):

 - Number (please fill in):

Name (and signature if hard copy):

Date:

Please return to: Mr Donnelly by: Wednesday 7 December

If returning parental consent electronically please attach/insert this to your email.