

DAY TRIPS: Parental Consent Form

TRIP: London Museum and China Town trip

DATE: Thursday 15 June 2017

NAME OF PUPIL:

HOUSE:

Parental Statement

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

I agree to meet the costs of the ticket and travel, which will be added to my next school bill.

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: Mrs Gao Zhang by: Friday 9 June

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