



Crickhowell High School
Ysgol Uwchradd Crughywel

Bay of Naples Italy Trip 2019

Consent Form

STUDENT NAME:		TUTOR GROUP:	
CONTACT NO:		DATE:	
I GIVE MY CONSENT FOR MY SON / DAUGHTER TO PARTICIPATE IN THE BAY OF NAPLES ITALY TRIP 2019:		YES	<input type="checkbox"/>
		NO	<input type="checkbox"/>
I ENCLOSE A £200.00 DEPOSIT (payable by 5th October 2018):		YES	<input type="checkbox"/>
		NO	<input type="checkbox"/>
I CONFIRM MY SON / DAUGHTER HAS A VALID PASSPORT:		YES	<input type="checkbox"/>
		NO	<input type="checkbox"/>
NAME OF PARENT / CARER / GUARDIAN:			
SIGNATURE OF PARENT / CARER / GUARDIAN:			