



Parental Consent Form

Student's name _____

Please tick either YES or NO to ALL questions below, where appropriate.

MONEY

Pocket Money – <i>Pocket money should be sent in advance to the college for the college to distribute</i>		
1.	<input type="checkbox"/> I have set a limit of _____ per week.	<input type="checkbox"/> There is no limit, my child can decide.
Bank Account		
2.	My child may have a bank account.	
		YES v NO v

TRANSPORT

3.	My child may travel in the college minibus.		
4.	My child may be transported by college staff or by arranged taxis.		
5.	My child may be a passenger in a friend's car.		

ACADEMIC

Curriculum (Subject Choices)		YES v	NO v
6.	The school Progress Report should be sent to: Parents / Agent / Guardian (Circle)		
7.	My child may join in standard sex education lessons.		
8.	Sports/Activities – I DO NOT WISH MY CHILD TO TAKE PART IN THE FOLLOWING SPORTS: e.g. rugby, martial arts, horse riding, football		

BIRTHDAYS

		YES v	NO v
9.	Do you want the college to organise birthday celebrations for your child? If Yes – amount to be spent on celebration £25 £50 £75 Other..... Do you have any special requests for the celebration?.....		

EXEAT (Overnight Leave)

		YES v	NO v
10.	I need to give my permission for any overnight EXEAT.		
	My child may decide once he/she reaches the age of 18 year old.		

HALF TERM

There are two half terms per academic year – in October and February. Each lasts 4 days and 3 nights. Students can stay full board on campus for £150 per half term, or leave the college completely and return for the second half of term. They do not normally need to vacate belongings from their rooms.

		YES <input type="checkbox"/>	NO <input type="checkbox"/>
11.	I would like my child to stay on campus for the October half term; please invoice me accordingly.		
12.	I would like my child to stay on campus for the February half term; please invoice me accordingly.		

LOCAL TRAVEL for Under 18s

		YES <input type="checkbox"/>	NO <input type="checkbox"/>
13.	I give my child (under 18) permission to travel to local towns and cities unaccompanied by a member of staff at appropriate times.		

14. CONTACT INFORMATION (Parent/Guardian)

Please give your current e-mail address. Regular communication from the school will normally be by e-mail.

NAME _____

ADDRESS: _____

PHONE LANDLINE (plus country code): _____

MOBILE (plus country code): _____

EMAIL: _____

Would you like us to send correspondence to your Agency? YES / NO

Other contact such as UK Guardian:

I am the parent/sponsor/guardian of the above named student. The following sample signature will be checked against any future correspondence giving consent for your child.

Name Printed:

Signature:

Email Address:

Date:

*Note: Any changes to the information on this form may only be made by the parent/guardian/agent who appears on this form. This form should be returned along with the separate Student Medical Form.

Abbey College

253 Wells Road, Malvern, WR14 4JF, Tel: +44 1684 892300 Fax: +44 1684 892757
www.abbeycollege.co.uk enquiries@abbeycollege.co.uk