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Headteacher: Mrs Claire Whitmore

## EDUCATIONAL VISIT CONSENT AND MEDICAL FORM

## Year 11 PROM

	Name o	f Trip:	Years	11	Prom
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Date of Trip: Friday 12th July 2019

Venue Skylark, Staverton, NN11 6JY

Start time: 6:30pm

Arrive back: Collect from venue at 11pm

Name of Student:	_ Tutor Group:
Medical/dietary conditions and allergies, please indicate	
Contact name & telephone number during visit:	
I give consent to my child participating in the above school visit.	
Signature of parent/carer:	
Print name:	_ Date:
I confirm I have paid via PARENTPAY (Please tick the box if you have p	paid the full amount)

Please return this form to Ms Mckenna.













