

Year 11 Prom 2019 – Friday 5 July 2019

REPLY SLIP – Please complete and return to the Finance Office by **Friday 3 May 2019**

I confirm that I would like my son/daughter to attend the Prom.

Student Name: _____ **Tutor Group:** _____

He/she is in good health and I consider him/her to be capable of taking part in the activities set out in this letter. In the event of illness or accident, I consent to any necessary medical treatment, which might include the use of anaesthetics.

Medical Details

In addition to the medical information I provided earlier in the year, the school now needs to be aware that:

Parent/Guardian signature: _____ Print name: _____

Consent for taking images

I consent to the images being used on the school website Yes No

Please indicate if your son/daughter has any dietary requirements or food allergies:

FINANCE OFFICE

Payment: £53.00

WisePay

(Date paid for on Wisepay, if applicable _____)

Cheque

(If paying by cheque, please write the student's name and Year 11 Prom on the back. Cheques made payable to **Crofton School**.)

Cash

Contact Email Address: _____