

## Parental / Guardian Consent Form - 16 & 17 year olds

School telephone +44(0)207 242 2234 / Emergency number +44(0)7762 425 376

### Student and course details

Family name (surname):			
First Name		Date of Birth	<div style="display: flex; align-items: center; gap: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">/</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">/</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> </div>
Course enrolled on:			
Course start date:		Course end date:	

**I give consent for my son/daughter (named above) to** (please tick ✓ as appropriate)

travel to and from the airport independently	<input type="checkbox"/>
participate in the course with student(s) aged 18 and above	<input type="checkbox"/>
be placed in a homestay which may have guests of over 18 years (the main host will be DBS-checked)	<input type="checkbox"/>
organise their own free time outside of school hours; e.g. go sightseeing or shopping, visit museums, the cinema or theatre, play sports, BUT return home before curfew time (please see below)	<input type="checkbox"/>
participate in the School's Social Programme with an arranged guide	<input type="checkbox"/>
travel independently between the school and accommodation, and around London	<input type="checkbox"/>
Stay in suitable accommodation arranged by school (please tick ✓ <b>1 option</b> from the list below): <input type="checkbox"/> homestay <input type="checkbox"/> flat share/residence <input type="checkbox"/> hotel <input type="checkbox"/> other (please specify):.....	

If **Bloomsbury International** organised your son/daughter's **homestay**, the following curfew hour will apply.

#### Student Age: 16 and 17

*Must return home every evening **by 10pm** (at the latest).*

**Unless otherwise agreed by Bloomsbury International well in advance.**

We may allow students to visit relatives in London, please contact us before arrival.

#### Groups

As above, but any additional excursions are to be advised by the group leader.

If **Bloomsbury International** did NOT organise your son/daughter's accommodation, please write details here

Full address			
Telephone number		Relationship to student	
Host's full name			
Host's mobile number/s			
Host's date of birth		Host's passport number	

If **Bloomsbury International** did NOT organise your son/daughter's journey (arrival to/departure from the UK), please write details here

	Arrival	Departure
<b>By public transport</b> (coach, bus, underground or train)		
<b>Private arrangement</b> (contact details of the person making the transfer)		

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### Further information about your son/daughter.

Does he/she have any conditions requiring medical treatment, including medication?	<input type="checkbox"/> YES (please give details):
	<input type="checkbox"/> NO
Does he/she have any allergies?	<input type="checkbox"/> YES (please give details)
	<input type="checkbox"/> NO
Does he/she have any special dietary requirements?	<input type="checkbox"/> YES (please give details)
	<input type="checkbox"/> NO
Does he/she have any disabilities and/or learning difficulties?	<input type="checkbox"/> YES (please give details and tell us about any help you may need)
	<input type="checkbox"/> NO

By signing below, I agree to the following:

- ✓ My child will abide by the curfew (explained on page 1 of this document)
- ✓ My son/daughter understands and will abide by all rules relevant to his/her stay in London (including school, accommodation and social programme). All rules can be found on our website <http://www.bloomsbury-international.com/en/courses/information-for-parents.html>
- ✓ I give my consent for the school, host family, group leader to act on my behalf in case of a medical emergency.
- ✓ I give the school / host family / group leader permission to give my son/daughter named medication when necessary.

**Bloomsbury International reserves the right to use any photos or videos taken at the school or during social activities for marketing and promotional purposes. Please notify us in writing if you do not wish for us to use your photos, videos or school work in our marketing material.**

### Details of the parent/guardian:

Family name (surname):		First Name	
Contact telephone number/s	+	(0)	
Contact email address			
Signature			
Full home address			
Date of Birth		Passport no	

**Please attach a copy of the parent and guardian's passport**

Thank you very much for the information provided. It will help us with the welfare of your son or daughter.