



# Bilborough College

## PARENTAL CONSENT FORM

**For students under the age of 18 only.**

Student Name: \_\_\_\_\_

I am the parent / guardian of the above named Bilborough College student and I give consent for them to (tick all that apply):

- To study at Bilborough College
- Joining in supervised Bilborough College social and enrichment activities
- Going on supervised Bilborough College trips to UK places of interest
- To live independently in the UK without a parent / guardian
- To live with a Homestay family

Signed: \_\_\_\_\_

Full Name: \_\_\_\_\_

Relationship to the student: \_\_\_\_\_

Date: \_\_\_\_\_