



PLEASE RETURN BY FRIDAY 20th SEPTEMBER

SPONSORED WALK 2019

4th October 2019

Name of Pupil..... Tutor Group.....

I have received the letter about the Sponsored Walk on Friday, 4th October and ...

I consent to my son/daughter taking part. Please note below any medical or other information which we need to know:

.....

My son/daughter will not be able to walk because (please give reason).....

.....

I do not wish my son/daughter to take part at all

Signed (parent/carer)..... Date.....