

**CONSENT FORM**

Please return this form to: The Finance Office, The Grange Academy by **14<sup>th</sup> February 2020**

**RE: Liverpool World Museum 25<sup>th</sup> February 2020**

Name of Student: ..... Form: .....

I give my permission for the above Student to attend **The Liverpool world Museum**

Emergency contact numbers on the day of the trip:

Name ..... Number.....

Name ..... Number.....

Details of any medical conditions of which we need to be aware:

.....  
.....

Signed : .....( Parent/Carer) Date.....