

Year 10 Alternative to Medicine Conference, 4 July 2018.

Please return this reply slip to Student Services by Wednesday 27 June in a sealed envelope for the attention of Ms Bailey, including: Full Name, Tutor Group, and Trip Name.

Student Name: _____ Tutor Group: _____

I give permission for my child to attend

I do not give permission for my child to attend

Signed Parent/Carer: _____ Date: _____