



CIRCULAR IB & AP No. 8 /AY 17-18

October 4, 2017

Parents' Consent Form: Italy Trip

I, the undersigned _____ parent / guardian of

_____, agree with the above itinerary and permit my

son/daughter to register for the trip to Italy and will settle the corresponding cost by the deadline set by the school.

Special medical attention required by my son/daughter:

Parent's Contact Number (in case of emergencies)

Parent's / Guardian's Signature

Date