



We-Do travel s. r. o.
65 Tatranska
841 06 Bratislava
Slovak Republic

Tel.: +421 948 877 323
info@wedotravel.sk
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Letter of Consent to Travel

for Students under the Age of 18 on Junior Educational Trips

as part of a School or a High School Group

(Under UK law, all people under the age of 18 are regarded as children. For this reason, it is required that all students who are under 18 years old obtain consent from a parent / legal guardian before travelling to the UK.)

SECTION 1 – STUDENT'S INFORMATION

Student's Details

Full Name:

Date of Birth (DD/MM/YYYY):

Dates of Stay (DD/MM/YYYY): 03/03/2020 to 06/03/2020

Parent/Legal Guardian Details (with whom the student permanently resides)

Full Name:

Full Street Address:

Telephone Numbers (*Home/Work/Mobile including country code*):

Email:

SECTION 2 – PARENTAL CONSENT

I consent to my child travelling in the United Kingdom as part of a High School Group. Please sign to indicate that you agree to the following:

My child can travel to the UK from 03/03/2020 until 06/03/2020 and be accommodated in the Travelodge Hotel London Croydon Central, Norfolk House, Wellesley Road, Croydon, CR0 1LH, United Kingdom, CR0 1XG as part of a Junior Educational Trip organized by *We-Do travel* (tour operator).

Whilst the group leaders take full responsibility for your child's safety during all programmed activities and will ensure that they are adequately supervised, there are periods during their stay where unsupervised free-time is offered, during which students are able to go out, unsupervised by an adult.



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SECTION 3 – DECLARATION OF MEDICAL AUTHORITY

In the event of illness, having parental responsibility for the named child, I give permission for medical treatment to be administered where considered necessary by a nominated first aider, or by suitably qualified medical practitioners. If I cannot be contacted and my child should require emergency hospital treatment, I authorise a qualified medical practitioner to provide emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, considered necessary by the medical authorities present.

Signed:

Name (*CAPITAL LETTERS*):

Date: