

Harrow House & Oldfeld Letter of Consent to Travel



Required document for students arriving from ALL countries

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS IF YOUR STUDENT IS UNDER THE AGE OF 18 YEARS

Full Name of Par	ent/Guardian	
Full address of Pa	arent/Guardian	
Parent/Guardian	Telephone No	
[including Count	· -	
Parent/Guardian	Passport/ID No	
I authorise my ch	nild named	
	the agreed accommodation to be arranged by Harrow Ho on the Student's Confirmation of Enrolment or CAS State	
Transfers from U	IK Airport to College (please circle ONE option)	
1. I have arr	anged for a representative from Harrow House	YES/NO
2. Own arra	ngements have been made	YES/NO
If you have answ	ered YES to option 2 please specify how your student will	arrive at Harrow House
and the name of	the authorised adult responsible for the student's transfe	r
	Signature of Parent/Guardian	
In the event of an emergency on the day of travel, please contact		

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Harrow House International College

Tel: +44 1929 475085 E-mail: emergencies@harrowhouse.co.uk

Harrow House International College is accredited by Accreditation UK and is listed on the UK Border Agency Register as a Tier 4 Sponsor with sponsorship license number: **ATU625RN0**

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