

Student Programmes Ireland Ltd

154 Main street, Charleville, Co Cork, Ireland

Natural Parents Travel Permission Form

I _____ Natural Parent of _____

Who is presently on an Academic Year Programme in Ireland am giving permission to him/her to travel independently. Student Ref No: AY _____

Travel Dates: From _____ To _____ (inclusive)

Flight Details: (If Applicable)

Departure: Airline: _____ Flight No: _____ Time: _____

Return: Airline: _____ Flight No: _____ Time: _____

Destination: _____

Accommodation Address: _____

Contact Telephone No: _____ Who Travelling With: _____

Reason For Journey: _____

I agree that Student Programmes Ireland Ltd are not in any way responsible for my child while travelling.

I understand that my son/daughter is off the programme during the above dates.

All expenses relating to this travel will be covered by us, her natural parents and that includes her insurance cover.

Signature of Parent: _____ Date: _____

Please complete and return this form to above address at least 10 working days before the travel dates, either by post, email or fax

Post – address above Email: bernie@spil.ie fax: 003536321656

Student will is not allowed to miss school days while travelling independently.