



## NORTHAM RESIDENTIAL COLLEGE NOMINATED TRAVEL & LEAVE PERMISSION FORM

*I require my Son/Daughter \_\_\_\_\_ to abide by the rules and regulations of the Northam Residential College and to be directed in his/her activities by the Supervisors for the common good of the student body at all times.*

Subject to this direction I give \_\_\_\_\_ permission to leave Northam Residential College in the custody of and travel with the following relatives or friends for **DAY LEAVE** or to visit. *(No parent follow-up fax required for those listed below)*

NAME/ADDRESS	Phone No.	P Plate Driver
1.		i
2.		i
3.		i
4.		i

Subject to the above direction I give permission for \_\_\_\_\_ to leave Northam Residential College in the custody of and travel with the following relative or friend for **OVERNIGHT LEAVE**. *(We require phone/fax confirmation from a parent/guardian before allowing your child to leave with those listed)*

NAME/ADDRESS	Phone No.	P Plate Driver
1.		i
2.		i
3.		i
4.		i

I have advised the above mentioned persons that when collecting \_\_\_\_\_ from the College they are required to sign the leave card located at the Supervisors office.

I will ensure that the above mentioned persons are aware of these arrangements when my son/daughter is staying with them.

I understand that a fax in advance is required from parents/guardians giving authorisations, for all other situations/circumstance.

NOTE: Midweek overnight leave is not permitted unless for school purposes, excursions or to stay with parents, direct relations of the appointed guardian.

Authorisation is required no later than 5pm Thursday each week.

\*\*\* *I confirm that the persons named on this Students Visitors List are over 18 years of age or a brother/sister if under 18 years of age.*

\_\_\_\_\_  
Parent/Guardian (Please Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date