

**PLEASE DO NOT RETURN TO THE SCHOOL.
YOU NEED TO CARRY IT WITH YOU WHEN TRAVELLING.**



Letter of Consent to Travel

Parental authorisation to travel for students aged under 18

Passport control in the UK may wish to see it.

Full name of parent/guardian _____

Full address of parent/guardian _____

Contact phone number of parent/guardian _____

Passport/ID number of parent/guardian _____

I authorize my child _____ to travel to the UK for the purpose of attending an English language course at Language Teaching Centre, Eastbourne from ___/___/20__ to ___/___/20__.

I have arranged for a Language Teaching Centre representative carrying ID to accompany my child from the airport and transport them to the school / host family accommodation.

Signature of parent/guardian: _____

Date _____

In case of queries on the day of travel please contact our emergency number +44 79 85 34 34 40.