CONSENT FORM

To: Parent	ts and guardians			
Name of child:			Class:	
	RE GREENDALE LEARNING to inform you that the school will			
	t for your *son/daughter/ward to			
S/N	ACTIVITY	VENUE	DATE	TIME
1	Secondary 1 Level Camp	Various locations	February – March 2020	During & beyond curriculum hours
2	ELADNEERG III Concert	SUTD	13 March 2020	Evening
3	Swimsafer Programme	School	Semester 2 2020	During & beyond curriculum hours
To: Ms I Prin I, consent* to i	Ms Ng Amy Principal Greendale Secondary Ng Amy cipal my *son / daughter / ward activity/activities.	_(Parent's / Gu	ardian's Name) hereb	y consent / do not
S/N	Activity	Till the state of	ck (√) for consent	
1	Secondary 1 Level Camp			
3	ELADNEERG III Concert Swimsafer Programme			
Name:		_ Relationship to	Student: *Father / Moth	