

CHILD'S/WARD'S TRAVEL PLANS FOR SCHOOL HOLIDAYS AND CONTACT DETAILS

Name of Child / Ward:			Sex: F / M *
NRIC / BC No.:		Class:	
Contact No.:	(Home),	(Mobile),	(Others)
Address:			
Please indicate with a	$1 \text{"}\sqrt{"}$ in the box provide	ed.	
My child/ward will be	traveling during the so	chool vacation	Yes No
If yes, please provide	the following details:		
Place of Travel		Period of Stay	
Country	City	From	То
•	provide details of country	and date of transit if your c	hild / ward will be
,, -	•	return the form with a NIL ret	urn (only for P1).
Name of Parent / Gua	ardian:		
Signature:		_	
Date:			

Please return this form to the school.