

ParentMail Order Form

Complete as appropriate and return to the College marked for the attention of Miss Ashleigh Johnston.

Delete as appropriate: I consent / do not consent to receive information from ParentMail®

I confirm that the £5.00 fee may be added to my eldest son's account
[Tick the box]

Names of Parent / Persons with parental responsibility:

_____ & _____

Son's Details: (Name, school year and House)

_____ Prep / Year: _____ House: _____

_____ Prep / Year: _____ House: _____

_____ Prep / Year: _____ House: _____

_____ Prep / Year: _____ House: _____

Email address of Father / Male guardian with parental responsibility:

Email address of Mother / Female guardian with parental responsibility:

Do you still wish to receive end of term mailings by post also: Yes No

Mobile Number of Father / Male guardian with parental responsibility:

Mobile Number of Mother / female guardian with parental responsibility:

Signature:

Date: