

Parental consent

I, the undersigned, (Surname, first name): _____

Acting in my capacity as **father** **mother** **Legal guardian**

SURNAME of the minor student (in capital letters): _____

First name(s): _____

Date of birth : (*jj/mm/aaaa*) : _____ / _____ / _____,

certify that I have read, understood and accepted the curfew that my child must observe:

- From Sunday to Thursday inclusive:
He/she will not be allowed to go out after.....
or
I authorise my child to go out until **10 p.m.** from Sunday to Thursday inclusive.
- Friday and Saturday evenings :
he/she will not be allowed to go out after from Sunday to Thursday inclusive.
or
I authorise my child to go out until **11 p.m.**

Please note that the school imposes a curfew of 11 p.m. (at the latest) on all underage students (under the age of 18) and that no exceptions will be made. No exceptions will be allowed.

Date and place :

Name of mother/father/legal guardian :

Signature :