

NEWNHAM COLLEGE
CAMBRIDGE CB3 9DF

**PARENTAL CONSENT FORM:
VISITORS ATTENDING NEWNHAM ADMISSIONS EVENTS**

I, _____ (please use capitals), the
parent/guardian (please delete as appropriate) of _____
(please use capitals) hereby give my consent to my daughter's visit to Newnham College.

If my daughter visits as part of a school group, I understand that she will be supervised by the accompanying teacher(s), who have been sent a risk assessment by Newnham College.

If my daughter visits on her own, I understand that this visit is made on a B&B basis only and that Newnham College staff will not supervise my daughter during her stay. I have read the Newnham College risk assessment for individual visits.

My address and telephone contact details are as follows: _____

Name (please print): _____

Signature

Date