



RYDAL PENRHOS SENIOR SCHOOL

LEAVE REQUEST FORM FOR BOARDERS

For the use of parents & guardians of boarders

Please address this form for the attention of the houseparent, then returned by fax to the school office on 01492 531872.

Dear _____

Please give _____

Permission to have *Weekend / Day leave for the following date(s)

From: _____ Until: _____

To stay with _____

At (*address*) _____

Telephone (House): _____

Telephone (Mobile): _____

*He / she will be collected at (*time*) _____ by _____

*He / She will be returned at (*time*) _____ by _____

Signed _____ Date _____
(*Parent or guardian*)