



Catholic Syro-Malabar Eparchy of Great Britain



BIBLE KALOTSAVAM 2022

Consent Form for minor to travel without parent

I, _____, giving my consent for my child/ children listed below to travel with _____ for the CSMEGB Bible Kalotsavam on at
.....

NAME/S OF CHILD/CHILDREN

- | | |
|----------|-------------|
| 1. _____ | AGE : _____ |
| 2. _____ | AGE : _____ |
| 3. _____ | AGE : _____ |

PARENTS NAME & ADDRESS

NAME : _____

ADDRESS: _____

POST CODE _____

MOBILE: _____

ACCOMPANYING ADULT DETAILS

NAME: _____

MOBILE _____

RELATIONSHIP _____

NAME
DATE :

SIGNATURE
(PARENT SIGNATURE IF MINOR)