



DEPARTURE FORM

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| Parent email address: | |
| Name of student: | |
| Date of departure from Buckswood | |
| Departure Flight / Transport number? | |
| Departure time (hh:mm) | |
| If you do not require a transfer with the school, please confirm how the student is leaving the school. | |
| Is the student travelling alone or with an adult? | |
| If leaving with an adult, please enter the name and relationship to pupil of adult travelling | |
| Name and Phone number of responsible adult pupil is staying with | |
| Address where pupil will be staying over the holiday | |

By submitting this form you agree for the personal data entered this form to be used & handled in accordance to our data protection/GDPR policy. Our data protection/GDPR policy can be viewed on our website.

Submit to: hob@buckswood.co.uk