NAIRANA
STUDY CENTRE

APPLICATION FORM

PERMISSION OF PARENT / GUARDIAN

I, _____ give permission for my son _____
↑ fathers or mothers name ↑ sons name

to attend the **Year 9 Study Weekend** (November 5—7).

PAYMENT DETAILS

Please find enclosed payment of $60:

☐ cash / cheque / money order OR

☐ e-transfer receipt

Unfortunately we have limited spaces available on this camp, and late or incomplete applications may not be accepted.

signed	dated