

For the attention of the UK immigration authorities

## Letter of consent to travel

### Student / Child details

Student name:  
Date of birth:  
Age:  
Gender:  
Passport number:

### School address & telephone numbers

**BLS**  
8 SPRINGFIELD ROAD  
BURY ST. EDMUNDS  
Telephone: +44-1284 765511  
Sito internet:  
<https://www.burylanguageschool.co.uk/>

### Course & transfer details

Course dates: From 16/06/2024 to 23/06/2024  
Course type: INTEGRATION PROGRAM  
Arrival date: 16/06/2024 Departure date: 23/06/2024  
Departure airport: MILAN Arrival airport: LONDON

### Parental, legal guardian details

Full name:  
Address:  
Mobile telephone number (including area code):  
Landline telephone number (including area code):

**Passport/I.D. number of parent or guardian:**

### Declaration & consent

I/we as the parent/s or guardian/s give consent for my child as named above to travel to Bury St. Edmunds, United Kingdom, to attend a course at BLS, Bury St. Edmunds, UK as per the dates above.

Name of parent or guardian: Name of parent or guardian:

Signature of parent or guardian: Signature of parent or guardian:

Date: Date:

Please enclose copy of passport/I.D