



Queen Alexandra's House

2021 / 2022
Under 18
Consent Form

Please fill in this form and return by email to: reception@queenalex.com

Consent Form for applicants who will be Under the age of 18 on entry to Queen Alexandra's House.

Section A

A Parent or guardian must fill out and sign the form for any resident under 18 years old applying to stay at Queen Alexandra's House.

Full Name:

Date of Birth:

University:

Next of Kin Contact Information

I have read and understood the Queen Alexandra's House Under 18 Policy and Declaration and accept the terms and conditions therein. I also accept full responsibility for the payment of Queen Alexandra's House residential fees in respect of the above named resident, and authorise Queen Alexandra's House to carry out First Aid in the event of an emergency.

In the unlikely event of an emergency involving the above named resident after they enrol at Queen Alexandra's House and before they reach the age of 18, please provide Two Next of Kin contact details below.

1. Next of Kin Contact

Full Name:

Relationship to resident:

Address:

(including post code)

Telephone No:

Mobile No:

Email:

Signed:

Date:

2. Next of Kin Contact

Full Name:

Relationship to resident:

Address:

(including post code)

Telephone No:

Mobile No:

Email:

Signed:

Date:

Section B

To be completed by parent / guardians of applicants living outside the UK only. (International residents).

A Parent or guardian must fill out and sign the form for any resident under 18 years old applying to stay at Queen Alexandra's House.

Full Name:

Date of Birth: **University:**

Next of Kin Contact Information

If you live outside of the UK and in the unlikely event of an emergency involving the above named applicant / resident after they enrol at Queen Alexandra's House and before they reach the age of 18, we will require you to also provide an Emergency Contact based in the UK (please see Under 18 Policy and Deceleration) in addition to parent / guardian contact details.

I have read and understood the Queen Alexandra's House Under 18 Policy and Declaration and accept the terms and conditions therein. I also accept full responsibility for the payment of Queen Alexandra's House residential fees in respect of the above named resident, and authorise Queen Alexandra's House to carry out First Aid in the event of an emergency. Please fill in the below details:

1. Next of Kin Contact

Full Name:

Relationship to resident:

Address:
(including post code)

Telephone No: **Mobile No:**

Email:

Signed: **Date:**

2. Emergency contact in the UK

Full Name:

Relationship to resident:

Address:
(including post code)

Telephone No: **Mobile No:**

Email:

Signed: **Date:**