

# Bruxelles 2024

The information you provide here, is the best way to help you and Frederikshavn Youth School in case of an emergency, and is only seen by the staff on the trip, and will be destroyed upon return to Denmark.

## Participant information (as in passport)

Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Phone no. \_\_\_\_\_

Date of birth (DD/MM/YY): \_\_\_\_\_

Passport no. \_\_\_\_\_

### Mother/legal guardian:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth (DD/MM/YY): \_\_\_\_\_

Phone number: \_\_\_\_\_

### Father/legal guardian:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth (DD/MM/YY): \_\_\_\_\_

Phone number: \_\_\_\_\_

### With my signature I hereby give my consent to:

- 
- My child travelling with Frederikshavn youth school to Brussels
- **Destination:** Meiniger Hotel, Brussels
- **Dates:** 14 th. - 18 th. of October 2024
- **Accompanying adult:** Christian Risom - +45 29630325 – Frederikshavn youth school.

I have read and understood this confirmation.

\_\_\_\_\_  
*Date / Signature*

***Sendes på (sikker) mail [chrr@frederikshavn.dk](mailto:chrr@frederikshavn.dk), eller afleveres på Ungdomsskolens kontor***