

## **Junior Group Agreement**

## YOUNG LEARNERS

Agent Name  Group Ref.  Centre  Please detail below all adults (group lead accompanying the group.  Name		A LUDAL		
Centre  Please detail below all adults (group lead accompanying the group.		Agent URN		
lease detail below all adults (group lead		Group ID		
ccompanying the group.		Date		
Name	ders/teachers/coach drivers & c	other accompanying adults)	that are	not students who will be
	Mobile Number	Position		Language
etter of Good Conduct				
I confirm that the people listed above good conduct' or 'certificate of crimin children.	e have supplied proof of their su nal record' from their home cour	itability to work with childrentry and that we have visibly	n by prov	viding either a police 'certificate of their proof of suitability to work witl
I confirm that we hold written parenta Learners Embassy Summer / EC Stud				o students under 18 at EC Young
I confirm that I have also informed the students in the group and be prepare			parental /	medical consent forms for all
I confirm that I have informed the Gro copy of the alternative insurance cov		urance has not been booke	d through	n EC then they will need to provide a
I confirm that the Group Leader is aw that it is understood that this may inv			en the sc	hool and their accommodation and
Print Agent Representative				
Position				
24-hour emergency number for your agency				
Signature of agent representative:				



