Last updated: 10.06.23

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I have read the above information and agree to its terms.

Student Name		Date of Birth		
Student Signature		Today's Date		
Parent/Guardian's signature		_ Today's Date		
Parent/Guardian's printed name				
Phone number	Email address	S	 	
Address	_City	, Postal Co	ode	
Student School/Teacher	······································	Year	Age	
If you have any questions, please contact Claire Heffernan, Managing Director, claire@superpoweragency.com				
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Approved by the Board of Trustees on Thursday, 10 June 2023

