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

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

Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Contact Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School:\_\_\_\_\_\_\_\_\_\_\_\_\_

Ty Coordinator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ty Coordinator Contact Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENTAL ENDORSEMENT FOR MINOR**

I, (print full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_, being the parent or guardian of the above named minor confirm the permissions to contact the organizers regarding the CAPPA TY Physics & Maths Programme.

Signature of Parent or Guardian: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For further information, please contact:**

**CAPPA Danielle Burke:** **Danielle.Burke@mtu.ie/** **CAPPA Tyndall : Martina Connolly Martina.Connolly@tyndall.ie**