



**Ridgeway College**  
www.ridgewaycollege.co.za

P.O. BOX 1705  
LOUIS TRICHARDT  
0920  
SOUTH AFRICA  
Tel: 015 151 0111

## WEEKEND PERMISSION FORM

Ridgeway will not be responsible for your child between signing out on a Friday and signing in at the hostel on a Sunday between 4 – 5pm.

This permission form is to make sure that you know who my child is with over the weekends.

I hereby give permission for my child to visit/stay with the following people over the weekend.

Name	Contact Number	Relationship to student

I also hereby agree to let my son/daughter sign themselves out when leaving the hostel on a week-end or at the end of term (tick if relevant).

I understand that the hostel prefers my child to be signed out by an adult, thereby handing over responsibility and that by my requesting my child to sign themselves out, the hostel will not take any responsibility for my child after they have signed themselves out.

..... DATE.....

Signature of parent/guardian



**Directors:**  
A Nethononda (Chairman)  
AWG Hattingh  
B Skhosana

