

**Manchester Access Programme**  
**University Life Conference 2018**  
**Reply slip**

**YOU MUST SEND THIS REPLY SLIP TO THE MAP TEAM BY NO LATER THAN  
WEDNESDAY 20<sup>th</sup> JUNE**

**DECLARATION TO BE SIGNED BY THE STUDENT:**

I am aware that I have been allocated the conference below:

**Tuesday 17<sup>th</sup> July - Wednesday 18<sup>th</sup> July Residential**  
**(Residential: taking part in evening social activities and staying overnight in Hulme Hall).**

I agree to adhere to any rules and regulations explained to me on the first day of the University Life Conference.

In the event of serious misbehaviour I understand that I will not be allowed to continue on the University Life Conference and will no longer be able to continue with the Manchester Access Programme.

**NAME OF STUDENT (PLEASE PRINT):**

\_\_\_\_\_

**MAP ID NUMBER**

\_\_\_\_\_

**SIGNATURE OF STUDENT:**

\_\_\_\_\_

**DATE:**

\_\_\_\_\_

**DECLARATION TO BE SIGNED BY THE PARENT/CARER:**

I am aware that my son/daughter has been invited to the University Life Conference and has been allocated the conference below:

**Tuesday 17<sup>th</sup> July - Wednesday 18<sup>th</sup> July**  
**(Residential: taking part in evening social activities and staying overnight in Hulme Hall).**

In the event of serious misbehaviour, I understand that my son/daughter will not be allowed to continue on the University Life Conference or the Manchester Access Programme.

I understand that if my son/ daughter changes their mind on the day regarding whether they stay overnight in the University Halls of Residence or whether they attend the evening social activities, it is the responsibility of my son/daughter to make me and the MAP team aware of this.

If my son/daughter decides **not** to stay overnight on the day of the conference having previously confirmed that they will be doing so, they will need to bring a letter of consent from their parent/carer to the conference to confirm this.

**NAME OF PARENT/CARER (PLEASE PRINT):**

\_\_\_\_\_

**SIGNATURE OF PARENT/CARER:**

\_\_\_\_\_

**DATE:**

\_\_\_\_\_