



	tional Department oto College	
Date:/	_/	
RANGITOTO CO	DLLEGE PARENT RESPONSIBILITY WAIVER	
Dear Director of	f International Students,	
We/I the parent(s) of tak		take full responsibility of our child
	el to	
The people my on Name: Address:	daughter/son will be travelling and staying with are:	
Mobile: (00 Email Address:)	
Rangitoto College Signed (Father):	document below you take full responsibility of your ch ge accommodation and take away any responsibility f	from Rangitoto College.
Signed (iViother)):	
Signed (Agent):		