

# SCHOOL FEES PROTECTION SCHEME

**Please read this important form.**

**Should you ignore this form and fail to return it to the Finance Department by the first day of term, you will not be included in the scheme.**

To: **The Finance Department**  
**Langley School**  
**Langley Park**  
**Loddon**  
**Norfolk NR14 6BJ**

Please return this form to Admissions: [admissions@langleschool.co.uk](mailto:admissions@langleschool.co.uk) no later than the first day of term, if you wish to **OPT IN**.

I have carefully read the terms and conditions relating to the above. Please include the following student in the School Fees Protection Scheme.

I realise that I shall not be able to claim any refund of fees from the school in respect of lost tuition due to the illness, accident or quarantine of my child if I have not chosen to opt in to the School Fees Protection Scheme.

Name of Student:

Signed:

(Parent or Guardian)

Name:

Date:

**PLEASE NOTE: If this form is not returned to the Finance Department, Langley School by the first day of term, you will automatically be excluded from the scheme.**