

PARTICIPANT LIABILITY FORM

Dear Parents,

Greetings from Meridian School, Madhapur!

We are delighted about your ward's participation in MerMUN 2024.

We are writing to inform you that your ward will be participating in Meridian MUN 2024, for which details have been shared to them via mail, online orientation etc.

Further details can be found on our Social Media and Website (linked below).

There is also a Social night event scheduled for 10th of August from **4:00 PM till 7:00 PM**.

The Socials Night will take place at the School Campus itself and is open to participants from **Grades 8th to 12th only**.

Lunch, Refreshments (And Dinner on Social Night) will be provided at the campus according to the itinerary on all 3 days, inclusive of Application fee.

NO Transportation will be provided for the participants on any of the three days and we kindly request you to pick your ward or make arrangements for the same.

We request you to kindly fill out the form given below by filling all necessary details.

You may either take print out of this form, fill it and submit it to us via the participant OR You can send the Signed Copy to either our Email (given below) or to in the Participant's WhatsApp group.

Contact:

meridianmunofficial@gmail.com

www.meridianmunofficial.com

+91 7995201262 Vivaan Rao, Secretary General

Regards,

Secretariat

Meridian MUN 2024

CONSENT FORM

I _____ Parent of _____, representing _____ in _____ committee, will hereby give consent to my ward for participating in MerMUN 2024. I will **make necessary transport arrangements for my ward**. I also understand that **meals and refreshments are provided**.

I declare that my ward belongs to **Grade 8th and above** and permit them to attend the Socials Night event on the **10th of August from 4:00 to 7:00 PM. (Yes / No)**

Signature of Parent

Date and time of signature

Signature of Participant

Date and time of Signature