

# Excursion Permission Note

<b>Where:</b>	Tuggeranong Netball Association Netball Courts, Were St Calwell ACT				
<b>Purpose: (including cost breakdown)</b>	Boys ACT Netball competition			<b>Transport:</b>	\$
				<b>Staffing:</b>	\$
				<b>Program:</b>	\$10
<b>Date:</b>	Monday 7 September	<b>Time:</b>	8.45am to 3pm	<b>Total Cost:</b>	\$10
<b>Transport:</b>	<b>Students are to organize their own transport to and from the venue</b>				
<b>Staff Attending:</b>	<b>Mary-Anne</b>				
<b>Special Requirements/ Medical Changes:</b>	<b>Students need to wear their school polo top and blue or black shorts. Please wear appropriate foot wear. Students need to supply their own water bottles. Bring your own nutritious lunch and snacks. There may be a light snack van available on the day.</b>				
<b>Meeting time/place/teacher:</b>	<b>Students will need to meet Miss Kirk at 8.45am at the Pavilion.</b>				

Many excursions involve non-refundable advance bookings and payments. Parents/Carers need to be aware that refunds are not always available if students change their minds about attending. Students are expected to catch up on class work missed as a result of attending this excursion.

Staff accompanying students on excursions will take all reasonable care while students are in their charge to protect them from injury and to control and supervise their behaviour and activities.

**Should there be any changes to your child's medical circumstances (as outlined in their enrolment medical information) please notify the teacher supervising this excursion.**

Parents should be aware that staff members are not responsible for injuries or damage to property that may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

*Please note: If you are experiencing financial hardship regarding this excursion, please contact the Principal to discuss payment options.*

*The Education Act 2004 states that your child will not be refused benefits or services if you do not choose to contribute. Individual records of contributions are confidential.*

Please do not hesitate to contact me at the school if you have any questions or require any further information.

**Mary-Anne Kirk**

**Co-ordinating teachers**

**Daniel Mowbray**

**Principal**

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I wish for my child \_\_\_\_\_ to attend the excursion to the ACT Netball Competition on Monday 7 September, 2020. **Note and \$10 payment to be returned to the Front Office by Wednesday 2<sup>nd</sup> September, 2020.**

I understand the conditions set out above and have read the attached schedule of events.

My child's medical circumstances have not changed **OR**  New medical information is attached

I give permission for photographs of my child to be taken and displayed as appropriate.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Parent Name (printed)

Payment Method:  Mastercard  Visa  Cash  Direct Deposit  QuickWeb  Cheque

UC High School Management Account **BSB: 032777 A/C: 001455**

**CREDIT CARD AUTHORITY**

I hereby give authority for payment to be made from my credit card. My credit card details are:

Card No:     •     •     •     CCV: \_\_\_\_\_

Expiry date: \_\_\_/\_\_\_ Cardholder's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Amount: \$ \_\_\_\_\_