

Excursion Permission Note

Where:	Local feeder primary Schools, Kaleen, Giralang & Maribyrnong				
Purpose: (including cost breakdown)	On The Road Tour			Transport:	\$
				Meals/Accom:	\$
				Staffing:	\$
				Program:	\$
Date:	Thursday 30 th May	Time:	9.00am to 3.00pm	Total Cost:	\$ 0
Transport:	Bus hired for the day				
Staff Attending:	Cameron Major, Pip Scott, Stuart Gilding, Mary-Anne Kirk & Aron Lyon				
Special Requirements/ Medical Changes:	Students should be dressed in school uniform. Students can leave from the venue at the end of the excursion with written permission.				
Meeting time/place/teacher:	Students will need to meet in the canteen at 8:55am.				

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

Cameron Major
Co-ordinating teacher

Daniel Mowbray
Acting Principal

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I wish for my child _____ to attend the 'On The Road Tour' excursion to Kaleen, Giralang & Maribyrnong Primary Schools on Thursday 30th May, 2019.

Notes to be returned to Major by Friday 17th May.

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)