

Excursion Permission Note

Where:	National Hockey Centre, 1 Riggall Place, Lyneham			
Purpose:	Year 9/10 VACT Volleyball competition	Program:	\$10	
Date:	Wednesday 4 th November	Time:	8:45am to 3pm	Total Cost: \$10
Transport:	Students are to organise their own transport to and from the venue			
Staff Attending:	Travis Passier			
Special Requirements/ Medical Changes:	Students need to wear their school polo top and blue or black shorts. Please wear appropriate footwear (non-marking soled shoes). School playing tops will be provided, but protective gear will not be provided (knee pads and ankle guards). Due to Covid-19 restrictions the following rules must be followed: No spectators. To keep with the 200 people, limit parents/carer's are to drop off and pick up only. Students must bring enough water and nutritious food for the day. No sharing drink bottles. Hand sanitizer and hand wash will be readily available, and all participants are encouraged to use it regularly throughout the day. Students that are ill are not to attend			
Meeting time/ place/teacher:	Students will need to meet Mr. Passier at 8.45am at the entrance of the Hockey center Gymnasium (near the Café)			

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.

Travis Passier

Daniel Mowbray

Co-ordinating teacher

Principal

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I wish for my child _____ to attend the excursion to the ACT Badminton Competition on Wednesday 4th November 2020. **Note and \$10 payment to be returned to the Front Office by Monday 2nd November 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: \$ _____