



Hurlstone Agricultural High School

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May 21, 2018

EXCURSION CONSENT FORM

Please complete and return this form to **Ms Elderton** by the **24th May 2018**.

Dear parent/guardian,

- Students in Extension 1 English will be going on an excursion to the Sydney Jewish Museum on **Friday 1st June, 2018**.
- This excursion has been planned to supplement the following work being done in the classroom:
process of life writing.
- The cost of the excursion is \$ 12
- The class will depart from **HAHS** at **8.30 am** and return to **HAHS** at **2:55**. **All students are required to travel back from the museum on the train to Hurlstone Agricultural High School and will be dismissed at 2:55pm.**
- Travel will be by **train and students are required to bring their opal card for travel to and from the venue.**
- Accompanying staff are **Ms Elderton**
- School uniform is to be worn to this excursion.

Special Needs

Special needs of my child which you should be aware (e.g. allergies, medication – please provide full details):

Privacy Advice

- The information provided on this consent form by the parent or caregiver is being obtained for the purpose of conducting a school excursion detailed above.
- It will be used by the NSW Department of Education and Training for seeking consent for the child to undertake activities within this excursion activity.
- Provision of this information is required by law / voluntary. It will be stored securely.
- You may correct any personal information provided at any time by contacting [98299222](tel:98299222)

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Samantha Elderton
Extension 1 English teacher

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Ms M. Pham
Deputy Principal

Consent

I hereby consent to participation in an excursion to

(*Student's full name*)

the **Sydney Jewish Museum** from **8.30 am** to **2:55pm** on **Friday 1st June 2018**

I give permission for my child to receive medical treatment in case of emergency. **YES / NO** (*please circle*)

.....
Signature of Parent / Guardian

.....
Name of Parent / Guardian

.....
Date