EXCURSION CONSENT FORM

Please complete and return this form to your class teacher by Friday, 8th April, 2016.

Dear parent/guardian,

- 10AHSIE and 10NHSIE will be going on an excursion to Warilla Beach, Wollongong on Monday 2nd May, 2016.
- This excursion has been planned to supplement the following work being done in the classroom: Coastal Management Fieldwork.
- The cost of the excursion is $25. Money paid to the register must be paid by Friday 8th April, 2016.
- The class will depart from HAHS at 8.30am and return to HAHS at 3.00pm.
- Travel will be by coach.
- Accompanying staff are Mr Nikolovski and Mrs Johnson.
- Contact number during the excursion is 9829 9222 (school hours) or 9829 9232 (Boarding School Duty Room after hours).
- Neat casual clothing is to be worn to this excursion.

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 HAHS on 9829 9222.

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Head Teacher                               Nick Wenban
Richard Nikolovski                        Deputy Principal

Please detach here…

Consent

I hereby consent to ........................................................参与 participation in an excursion to

(Student’s full name)

Warilla Beach, Wollongong on Monday, 2nd May, 2016. The excursion will depart from HAHS at 8.30am and return to HAHS at 3.00pm.

Return this note to: your class teacher.

Special Needs

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

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

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Signature of Parent / Guardian          Name of Parent / Guardian          Date