

SCHOOL EXCURSION / INCURSION NOTIFICATION

Dear Parent/Caregiver, an excursion/activity has been organised for your child.

Excursion / Incursion	Kalabara Malang Dance Troupe - Lake Macquarie City Council Performance
Date	Thursday 23rd November 2023
Year / classes involved	12 students from years 7-10
Location	Warners Bay Foreshore
Purpose	The Kalabara Malang Aboriginal Dance and Didge Troupe have been invited by Lake Macquarie City Council to perform two dances at Zonta's launch of the 16 Days of Activism event. The event is planned for Thursday, 23 November at 10am at Warners Bay Rotunda.
Start time	8:30am
End time	3:00pm
Transport	Students will be transported by bus and should arrive at the bus bay (Henry Street) by 8:30am. Bus will return by 3pm.
Cost	No cost payable to office
Dress requirements	Students are to come to school dressed in their dancing blacks.
Food	N/A
Equipment	Girls - black full or 3 1/4 length tights and a black singlet. Boys - N/A Water bottle, hat, sunscreen.
Organising teacher	Jaimie Hobby
Teachers attending	Jaimie Hobby, Daniel Taylor, Lance Druery
Additional information	N/A
Consent Form due to Office by	Monday 20th November 2023

General Information Concerning Excursions / Incursions

- 1. Excursions and Incursions form an integral part of the curricula by providing enriching experiences which cannot be provided in the classroom.
- 2. Students must wear full school uniform unless otherwise instructed above. Students who are not in uniform will not be allowed to attend.
- 3. A standard of behaviour is expected of all students representing the school in the greater community.
- 4. Please note the time and place of departure and return, as advised above.



EXCURSION / INCURSION PERMISSION FORM

Please return this permission form to the Office

Kalabara Malang Dance Troupe - Lake Macquarie City Council Performance

Date	Thursday 23/11/2023 8:30am - 3:00pm	
Location	Warners Bay Foreshore	
Cost	No cost payable to office	
Organising Teacher	Jaimie Hobby	
I give permission for (student name) of year/class to participate in this excursion / incursion.		
	nd end times and dress requirements. Thich you should be aware: eg. allergies or medical conditions	
Medical Assistance: In the ever assistance or treatment for my ch	nt of any accident or illness, I authorise the teacher in charge to seek medical nild at my cost.	
Parent signature:		
Parent name:		
Parent phone number:		

• Please return this consent form to the Office

Excursion / Incursion

• Tear off and keep previous page for your information

Emergency Contact Name:

Emergency Contact Number: _____