

## SCHOOL EXCURSION / INCURSION NOTIFICATION

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

Excursion / Incursion	YR9 Didge Group
Date	Friday 5th May 2023, Friday 12th May 2023, Friday 19th May 2023, Friday 26th May 2023, Friday 2nd June 2023, Friday 9th June 2023, Friday 16th June 2023, Friday 23rd June 2023
Year / classes involved	16
Location	Belmont High School
Purpose	Cultural sessions for Aboriginal and Torres Strait Islander boys. Sessions will involve mentoring, yarning and exploring the use of the Didge.
Start time	12:30pm
End time	3:00pm
Transport	N/A
Cost	No cost payable to office
Dress requirements	Full school uniform
Food	N/A
Equipment	Can bring own Didge to leave in Aboriginal Education room.
Organising teacher	Daniel Taylor
Teachers attending	Daniel Taylor
Additional information	Support cultural safety and sense of belonging Supporting ways of being and doing
Consent Form due to Office by	Thursday 4th May 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

Excursion / Incursion	YR9 Didge Group
Date	Friday 05/05/2023 12:30pm - 1:30pm, Friday 12/05/2023 2:00pm - 3:00pm, Friday 19/05/2023 12:30pm - 1:30pm, Friday 26/05/2023 2:00pm - 3:00pm, Friday 02/06/2023 12:30pm - 1:30pm, Friday 09/06/2023 2:00pm - 3:00pm, Friday 16/06/2023 12:30pm - 1:30pm, Friday 23/06/2023 2:00pm - 3:00pm
Location	Belmont High School
Cost	No cost payable to office
Organising Teacher	Daniel Taylor

I give permission for (student name) \_\_\_\_\_

of year/class \_\_\_\_\_\_ to participate in this excursion / incursion.

## □ I have noted the start and end times and dress requirements.

Additional needs of my child of which you should be aware: eg. allergies or medical conditions

**Medical Assistance:** In the event of any accident or illness, I authorise the teacher in charge to seek medical assistance or treatment for my child at my cost.

Parent signature: \_\_\_\_\_

Parent name: \_\_\_\_\_

Parent phone number: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

• Please return this consent form to the Office

• Tear off and keep previous page for your information