



SCHOOL EXCURSION / INCURSION NOTIFICATION

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

Excursion / Incursion	Bandfest 2023
Date	Tuesday 17th October 2023
Year / classes involved	BHS Concert Band, BHS Junior Concert Band, BHS Stage Band
Location	Newcastle City Hall
Purpose	Bandfest Performance Concert Band and Junior Concert Band Stage Band
Start time	9:30am
End time	3:00pm
Transport	Travel by bus to and from the venue
Cost	\$22.00
Dress requirements	FULL BAND PERFORMANCE UNIFORM Black Performance Shirt, Black Pants, Black Socks and Black Shoes
Food	Students need to bring all recess, lunch and snacks for the day as there will be no access to external food venues allowed on the day.
Equipment	Students need to bring their Instrument/s and their music and all necessary Band Equipment.
Organising teacher	Alison Gill
Teachers attending	Alison Gill, John Gill
Additional information	N/A
Consent Form and Payment due to Office by	Friday 15th September 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 with your payment to the Office

Excursion / Incursion	Bandfest 2023
Date	Tuesday 17/10/2023 9:30am - 3:00pm
Location	Newcastle City Hall
Cost	\$22.00
Organising Teacher	Alison Gill

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: _____

PAYMENT OPTIONS

☐ **Parent Online Payment** through the school website and click on *Make a Payment*.
Enter excursion / incursion name in the payment description under *Excursions*.

Receipt # _____ Date paid: _____

☐ **Cash** (correct amount please)

☐ **Cheque** (payable to *Belmont High School*)

- Please return this consent form with your payment to the Office
- Tear off and keep previous page for your information