



## SCHOOL EXCURSION / INCURSION NOTIFICATION

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

<b>Excursion / Incursion</b>	Band Rehearsal for Bandfest week 1
<b>Date</b>	Monday 14 October 2024
<b>Year / classes involved</b>	Junior Band, Concert Band and Stage Band
<b>Location</b>	Belmont High School
<b>Purpose</b>	Students from Concert Band, Junior Band and Stage Band will be rehearsing for Bandfest to refine the pieces they have been learning. All three ensembles need full attendance for this urgent preparation which has been hindered by multiple student absences and lunchtime interruptions. In order for each ensemble to achieve their full potential in this competition we need all members to be present so everyone is included and informed with the correct information relating to the performances and the music.
<b>Start time</b>	12:30pm
<b>End time</b>	3:30pm
<b>Transport</b>	N/A
<b>Cost</b>	No cost payable to office
<b>Dress requirements</b>	Full school uniform.
<b>Food</b>	N/A
<b>Equipment</b>	N/A
<b>Organising teacher</b>	Alison Gill
<b>Teachers attending</b>	Alison Gill
<b>Additional information</b>	N/A
<b>Consent Form due to Office by</b>	Monday 14 October 2024

### ***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

<b>Excursion / Incursion</b>	Band Rehearsal for Bandfest week 1
<b>Date</b>	Monday 14/10/2024 12:30pm - 3:30pm
<b>Location</b>	Belmont High School
<b>Cost</b>	No cost payable to office
<b>Organising Teacher</b>	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:** \_\_\_\_\_

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