

SCHOOL EXCURSION / INCURSION NOTIFICATION

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

Excursion / Incursion	Sailability
Date	Thursday 29th February 2024, Thursday 14th March 2024, Thursday 28th March 2024, Thursday 11th April 2024, Thursday 9th May 2024, Thursday 23rd May 2024, Thursday 6th June 2024, Thursday 20th June 2024, Thursday 4th July 2024
Year / classes involved	6 support students
Location	Belmont 16 Footers
Purpose	A number of Special Education students will attend the Sailability program at Belmont Sailing Club.
Start time	9:05am
End time	12:30pm
Transport	Walking
Cost	No cost payable to office
Dress requirements	School sports uniform
Food	Students are to take their recess and a water bottle. They will be given a hot dog at the venue each week.
Equipment	Hat
Organising teacher	Emma Wooding
Teachers attending	Emma Wooding
Additional information	\$12 per term payable in cash on the first day.
Consent Form due to Office by	Wednesday 21st February 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

Excursion / Incursion	Sailability
Date	Thursday 29/02/2024 9:05am - 12:30pm, Thursday 14/03/2024 9:05am - 12:30pm, Thursday 28/03/2024 9:05am - 12:30pm, Thursday 11/04/2024 9:05am - 12:30pm, Thursday 09/05/2024 9:05am - 12:30pm, Thursday 23/05/2024 9:05am - 12:30pm, Thursday 06/06/2024 9:05am - 12:30pm, Thursday 20/06/2024 9:05am - 12:30pm, Thursday 04/07/2024 9:05am - 12:30pm
Location	Belmont 16 Footers
Cost	No cost payable to office
Organising Teacher	Emma Wooding

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