



SCHOOL EXCURSION / INCURSION NOTIFICATION

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

Excursion / Incursion	Year 8 Reading Groups, Group One
Date	Wednesday 27th March 2024 (Reading Groups), Wednesday 3rd April 2024, Wednesday 10th April 2024, Wednesday 1st May 2024, Wednesday 8th May 2024, Wednesday 15th May 2024, Wednesday 22nd May 2024, Wednesday 29th May 2024, Wednesday 5th June 2024, Wednesday 12th June 2024, Wednesday 19th June 2024, Wednesday 26th June 2024, Wednesday 3rd July 2024, Wednesday 24th July 2024, Wednesday 31st July 2024, Wednesday 7th August 2024, Wednesday 14th August 2024, Wednesday 21st August 2024, Wednesday 28th August 2024, Wednesday 4th September 2024, Wednesday 11th September 2024, Wednesday 18th September 2024, Wednesday 25th September 2024, Wednesday 16th October 2024, Wednesday 23rd October 2024, Wednesday 30th October 2024, Wednesday 6th November 2024, Wednesday 13th November 2024, Wednesday 20th November 2024, Wednesday 27th November 2024, Wednesday 4th December 2024
Year / classes involved	17, Year 8 students
Location	Belmont High School
Purpose	An intensive Reading program, which involves student's reading and completing a range of literacy activities, with teachers, SLSO's and community volunteers.
Start time	9:00am
End time	10:00am
Transport	N/A
Cost	No cost payable to office
Dress requirements	Full school uniform
Food	N/A
Equipment	Pencil cases
Organising teacher	Elisha Ankeney
Teachers attending	Elisha Ankeney, Karen Newman, Lance Druery, Erin Finnane
Additional information	N/A
Consent Form due to Office by	Monday 25th March 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	Year 8 Reading Groups, Group One
Date	Wednesday 27/03/2024 9:00am - 10:00am (Reading Groups), Wednesday 03/04/2024 9:00am - 10:00am, Wednesday 10/04/2024 9:00am - 10:00am, Wednesday 01/05/2024 9:00am - 10:00am, Wednesday 08/05/2024 9:00am - 10:00am, Wednesday 15/05/2024 9:00am - 10:00am, Wednesday 22/05/2024 9:00am - 10:00am, Wednesday 29/05/2024 9:00am - 10:00am, Wednesday 05/06/2024 9:00am - 10:00am, Wednesday 12/06/2024 9:00am - 10:00am, Wednesday 19/06/2024 9:00am - 10:00am, Wednesday 26/06/2024 9:00am - 10:00am, Wednesday 03/07/2024 9:00am - 10:00am, Wednesday 24/07/2024 9:00am - 10:00am, Wednesday 31/07/2024 9:00am - 10:00am, Wednesday 07/08/2024 9:00am - 10:00am, Wednesday 14/08/2024 9:00am - 10:00am, Wednesday 21/08/2024 9:00am - 10:00am, Wednesday 28/08/2024 9:00am - 10:00am, Wednesday 04/09/2024 9:00am - 10:00am, Wednesday 11/09/2024 9:00am - 10:00am, Wednesday 18/09/2024 9:00am - 10:00am, Wednesday 25/09/2024 9:00am - 10:00am, Wednesday 16/10/2024 9:00am - 10:00am, Wednesday 23/10/2024 9:00am - 10:00am, Wednesday 30/10/2024 9:00am - 10:00am, Wednesday 06/11/2024 9:00am - 10:00am, Wednesday 13/11/2024 9:00am - 10:00am, Wednesday 20/11/2024 9:00am - 10:00am, Wednesday 27/11/2024 9:00am - 10:00am, Wednesday 04/12/2024 9:00am - 10:00am
Location	Belmont High School
Cost	No cost payable to office
Organising Teacher	Elisha Ankeney

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**