



Hunter School of the Performing Arts Day Trip School Excursion/Inursion Consent Form

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

Excursion/Activity	10 PASS Paddle Boarding Experience
Date(s)	Tuesday 28/03/2023 9:00am - 3:10pm
Venue	Kite SUP
Students/Class	Year 10 PASS Class
Cost of excursion	\$50.00
Transport	Coach
Supervision	Natalie Skelly
Please bring	Swimmers, Rash Vest, Towel, hat, sunscreen and appropriate walking shoes
Students must wear	Full School Uniform
Food	Students to provide their own food and drink. Students will have an opportunity to purchase their lunch at a variety of food outlets at Warners Bay Foreshore
Additional information	N/A

Natalie Skelly
Teacher in charge of excursion

Libby Guider
Deputy Principal

Medical Disclaimer

Parents - please note there is no personal injury insurance cover provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity. Parents and caregivers are advised to assess the level and extent of their child's involvement in the sport program offered by the school, zone, area, and state school sport associations when deciding whether additional cover, above that provided by Medicare, is required. The NSW Supplementary Sporting Injuries Benefits Scheme, funded by the NSW Government, covers any injury resulting in the permanent loss of a prescribed faculty or the use of some prescribed part of the body.



Excursion: 10 PASS Paddle Boarding Experience

Date: Tuesday 28/03/2023 9:00am - 3:10pm

Payment
Code
SUNDRY

I give permission for my child of Year to attend the excursion/activity above.

My child's medical details have NOT changed since the enrolment form submitted at the start of the year **or:**

My child's medical details HAVE changed since the enrolment form submitted at the start of the year. My child's updated medical details are attached. *Note: It is the responsibility of the parent/carer to notify the school when their child's medical details change.*

Signed (Parent/Guardian) Date