



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

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

<b>Excursion/Activity</b>	Canberra Excursion
<b>Date(s)</b>	Wednesday 03/04/2024 6:00am - Friday 05/04/2024 7:30pm (Bus departs HSPA at 6:30am sharp. Expected finish time is approximate due to traffic. Please see Class Dojo for time updates on the journey home.)
<b>Venue</b>	National Museum of Australia, Parliament House, Australian War Memorial, Questacon, Museum of Democracy, Canberra Park Resort, National Gallery of Australia, National Electoral Education Centre, AIS (Australian Institute Of Sport)
<b>Students/Class</b>	Year 6
<b>Cost of excursion</b>	\$425.00
<b>Transport</b>	Coach
<b>Supervision</b>	Lisa Bone, Rachel Stark, Kahli Saunders, Ruth Morris, Jen McPherson, Kaitlyn Priest, Hugh Hogan
<b>Please bring</b>	See attached note.
<b>Students must wear</b>	Full School Uniform
<b>Food</b>	Please pack morning tea, lunch and afternoon tea for the first day. Students may also like to pack a small amount of snacks for the coach trip to and from Canberra.
<b>Additional information</b>	Please see attached information note.

Lisa Bone  
Teacher in charge of excursion

Karen O'Neill  
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.



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Payment  
Code  
INV

Signed ..... (Parent/Guardian) Date .....