

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.

| Excursion/Activity | Year 5 Dubbo Camp | |
|------------------------|---|--|
| Date(s) | Wednesday 03/04/2024 6:30am - Friday 05/04/2024 6:00pm (Wednesday- Friday of Week 10) | |
| Venue | Red Hill Environment Education Centre, Dubbo Goal, Wellington Caves, Dubbo Discovery Lodge, Taronga Western Plains Zoo | |
| Students/Class | Year 5 students | |
| Cost of excursion | \$420.00 | |
| Transport | Coach | |
| Supervision | Kate Hanna, Mikhaela Adam, Alex Clark | |
| Please bring | N/A | |
| Students must wear | Full School Uniform is to be worn including a packed school jacket and hat. Please refer to the additional information note attached, for extra clothing items required. | |
| Food | Students will require a packed recess and lunch in a disposable bag for Day 1. Please pack a water bottle to refill throughout the excursion. All other meals and snacks are provided. If there are any changes to dietary requirements, please contact the Primary office. | |
| Additional information | Please refer to the additional information note attached, including the packing list, for more information. | |

Kate Hanna 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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| Excursion: Year 5 Dubbo Camp | Payment |
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| Week 10) | INV |

□ I give permission for my child to

attend the excursion/activity above.

Signed (Parent/Guardian) Date