



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	Campus visit - The University of NSW and The University of Technology, Sydney.
Date(s)	Monday 10/10/2022 6:30am - 5:30pm (Please indicate if you would like a Central Coast pick up/drop off at the Twin Service Stations near Olivers.)
Venue	UNSW, UTS
Students/Class	Maximum of 46 self nominated students from Yr 12, 2023 (current Yr 11)
Cost of excursion	\$25.00
Transport	Coach
Supervision	Deanna Longobardi, Aurelia Nowak
Please bring	N/A
Students must wear	Full School Uniform
Food	Bring snacks and a drink bottle. No time to stop until we get to UNSW. Own packed lunch OR purchase your lunch at UNSW.
Additional information	N/A

Deanna Longobardi
Teacher in charge of excursion

Megan Lubinski
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

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.*

Payment Method (Payment must accompany this permission form):

- Cash:** \$ enclosed
- Cheque:** Cheque enclosed for \$
- Online:** Amount Paid: Receipt Number

Signed (Parent/Guardian) Date