



Hunter School Of The Performing Arts Overnight/Water/Sport Excursion/Incursion Form

EF3
P1/3

Dear Parent/Caregiver,

An excursion/activity has been organised for your child.

Excursion/Activity	The Gold Excursion - The Great Aussie Bush Camp
Date(s)	Wednesday 3rd April - Friday 5th April 2019
Venue	The Great Aussie Bush Camp, Tea Gardens
Students/Class	Year 5
Cost of excursion	\$405
Times/Places	Depart: HSPA Primary from 9 am 3/4/2019 Return: HSPA to 3:10 pm 5/4/2019
Transport	Coach
Supervision	Mrs Jennings, Ms Hillard and TBA
Please bring	A detailed itinerary and what to pack list will be sent home closer to the date.
Students must wear	A detailed itinerary and what to pack list will be sent home closer to the date.
Additional information	Payments due Friday 1 st February 2019

M Hillard
.....
Teacher in charge of excursion

D. O'Neill
.....
Deputy Principal

Medical Disclaimer

Parents - please note there is no personal injury insurance cover provided by the NSW Department of Education and Training 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: The Gold Excursion - The Great Date: **3/4 to 5/4/2019**

Office Use Only
QBS
.....

Return this portion and the attached medical information form to the **FRONT OFFICE**

by: 1/2/2019. **Payment must accompany this permission form.**

I give permission for my childof Year / Class.....
to attend the excursion/activity above.

Payment Method:

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

Signed (Parent/Guardian) Date



Hunter School Of The Performing Arts
Overnight/Water/Sport Consent and Medical Information Form

EF3
P2/3

The Gold Excursion - The Great Aussie Bush Camp

Faculty

Teacher in Charge

PRIMARY

JADE HILLARD

Student Details

Surname

Given names

Address

Post Code

School Year

Date of Birth

Age

Male

Female

Are you of Aboriginal or Torres Strait Island descent?

Are you or your parents from a Non-English speaking background?

Yes No

Yes No

Excursion

Venue

Dates (from)

Dates (to)

Glouster Park & TGABC

03/04/2019

05/04/2019

Transport

Departure Time / Place

Return Time / Place

Coach

9am HSPA

3:10pm HSPA

Private Transport

Name of Driver:

Registration No.:

Note: Student Driver / Passenger of Student Driver must complete additional permission note.

Parent/Guardian Details

Mother/Guardian

Father/Guardian

Guardian/Other Contact

Full name of parent or guardian

Home phone

Work phone

Mobile

Special/Dietary Needs

Please identify any special needs or requirements not listed above (eg diet, wheelchair access etc)

Has he/she had the Tetanus injection in the last three years?

Yes

No

Year

Swimming Ability excursion

Not Applicable to this

- Strong – 50 metres unaided
 Average – 25 metres unaided
 Poor – 10 metres unaided
 Non Swimmer

Medical Information

Does the participant suffer from any of the following:

- Any allergic condition
 Skin condition
 Diabetes
 Epilepsy, fits or blackouts
 A disability or chronic illness
 Asthma (include asthma plan)
 A current illness eg Flu
 Other

If yes to one or more, please give details (attach sheet if required)

Medicare Number:

Position number on Medicare Card

Private Health Insurance Fund

Membership Number

Do you have ambulance cover? Yes No

Current Medication

Name	Time and Dosage – Please specify exact time of medication									
	Breakfast		Lunch		Dinner		Before Bed		Other	
	Time	Dose	Time	Dose	Time	Dose	Time	Dose	Time	Dose
eg Bricanyl	8am	2 puffs	12.30pm	2 puffs	6pm	2 puffs	8pm	2 puffs		

Notes:

1. Scheduled medication must be provided in the original container (as required by legislation).
2. All medications will be collected and administered by staff, unless notified in writing to the contrary.
3. Staff will supervise and register the taking of all medication.

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Other Information: