



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

**EF2**

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

<b>Excursion/Activity</b>	Open Girls Volleyball
<b>Date(s)</b>	7/2/2019
<b>Venue</b>	Broadmedow Basketball Stadium
<b>Students/Class</b>	Sports Team
<b>Cost of excursion</b>	\$11(payable on the day)
<b>Times/Places</b>	Depart: <b>8.30</b> from <b>Home</b> Return: <b>TBA</b> to <b>School</b> by <b>3.13</b>
<b>Transport</b>	Own transport
<b>Supervision</b>	Ben Carle
<b>Please bring</b>	Water bottle, \$12 entry fee, appropriate sports wear (shirt provided)
<b>Students must wear</b>	Full school uniform
<b>Additional information</b>	The tournament is a knock out. Depending on how successful the team is depends on how late they will finish.

.....  
 Teacher in charge of excursion

.....  
 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: Open Girls Volleyball**

**Date: 7/02/2019**

Payment Code  
 ..... - .....

Return this portion to the Front Office (7-12) or Primary Office (3-6) by **6/02/2019**

- I give permission for my child ..... of Year ..... to attend the excursion/activity above.
- My child's medical details have NOT changed since the OASIS enrolment form submitted at the start of the year or:
- My child's medical details HAVE changed since the OASIS 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 .....