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## **Hurlstone Agricultural High School**

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 GLENFIELD NSW 2167
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 9829 9222

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November 14, 2019

## **EXCURSION CONSENT FORM**

Please complete and return this form to Mr Trotter by the 18/11/19.

Dear parent/guardian,

- Year 10 will be going on an excursion to the Royal National Park on Friday 29<sup>th</sup> November. They will do a 10km return
  walk from Otford to Burning Palms along the Royal National Park Coastal Track.
- This excursion has been planned to supplement the following work being done in the classroom:
  - celebration of the end of Year 10, connecting with peers and improving fitness
- . The cost of the excursion is \$ nil except they will need to use their own Opal Cards
- The class will depart from Horne Park at 7.35am and return to Glenfield Station at 3.30pm. If they are allowed to make their own way home from the excursion, please provide a note before the day.
- Travel will be by train
- Accompanying staff are TBA. The staff to student ratio will be 1 to 15.
- · Neat casual clothing is to be worn to this excursion.

## **Special Needs**

Special needs of my child which you should be aware (e.g. allergies, medication - please provide full details):

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• The information provided on this consent form by the parent or caregiver is being obtained for the purpose of conducting a school excursion detailed above.

<ul> <li>It will be used by the NSW Department of Education and Training for seeking consent for the child to undertake activities within this excursion activity.</li> <li>Provision of this information is required by law / voluntary. It will be stored securely.</li> </ul>							
You may correct any personal information provided at any time by contacting the school office							
Year 10 Advisor Timothy Trotter	Deputy Principal						
Consent							
I hereby consent to	participation in an excursion to						
(Student's full name)							
the Royal National Park for a 10km return bush walk from Otford to Burning Palms from 7.35am to 3.30pm.							
I give permission for my child to depart from Otford station to travel home unaccompanied at the end of the bush walk. YES/NO (please circle).							
I give permission for my child to receive medical treatment in case of emergency. YES / NO (please circle)							
Signature of Parent / Guardian	Name of Parent / Guardian Date						