

Hurlstone Agricultural High School

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November 14, 2019

EXCURSION CONSENT FORM

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

Dear parent/guardian,

- Year 10 will be going on an excursion to Darling Harbour, Sydney on Friday 29th November. They will be visiting darling harbour with the option to visit the Chinese Gardens (\$6 pay at the door) and playing two games of Laser Tag (\$15).
- This excursion has been planned to supplement the following work being done in the classroom:

Building connections between peers as part of student welfare.

- The cost of the excursion is \$ 15 paid at the office by 18/11/19 AND they will need to use their own Opal Cards.
- The class will meet at Horne Park at 8.30am 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. Students MUST use their own Opal Cards. These CANNOT be the same school Opal Cards.
- Accompanying staff are TBA. The staff to student ratio will be 1 to 20.
- Neat casual clothing is to be worn to this excursion.

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

Privacy Advice									
 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. 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. Provision of this information is required by law / voluntary. It will be stored securely. 									
							You may correct any personal information prov	d at any time by contacting the school office	
							Year 10 Assistant Year Adviso Ms Crichton	Deputy P	rincipal
Consent									
I hereby consent to	participation in	an excursion to							
	(Student's full name)								
Laser Tag at Darling Harbour, Sydney	ty from 8.30am to 3.30 pm on Friday 29th Nover	mber, 2019.							
I give permission for my child to depa YES/NO (please circle).	from Darling Harbour to travel home unaccom	panied at the end of the excursion							
I give permission for my child to receive	edical treatment in case of emergency. YES / NO) (please circle)							
Signature of Parent / Guardian		 Date							