



Hurlstone Agricultural High School

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December 4, 2019

EXCURSION CONSENT FORM

Please complete and return this form to **your classroom teacher by the 3rd February 2020.**

Dear parent/guardian,

- Year 12 Biology will be going on an excursion to Museum of Human Disease UNSW on **Tuesday 18th February 2020.**
- This excursion has been planned to supplement the following work being done in the classroom:
Mod 5 and 6 Genetic Technologies and Mod 7 and 8 Infectious and noninfectious diseases
- The cost of the excursion is \$ 37
- The class will depart from **the front of Hurlstone Agricultural High School at 8am** and return to **the front of the school at 5pm**
- Travel will be by **Coach**
- Accompanying staff are **Miss Rose, Mr Mahfouz, Ms Crichton, Mr Bayer and Ms Garrick**
- School uniform 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):

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 provided at any time by contacting Miss Garrick 0402273896 or Miss Rose 0402070107

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Ms Garrick
Biology Co-ordinator

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Deputy Principal

Consent

I hereby consent to participation in an excursion to
(Student's full name)

the **Museum of Human Disease at UNSW** from **8am to 5pm on Tuesday 18th February 2020** .

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