



Day Trip School Excursion/IncurSION Consent Form - Stand Tall

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

Date	Wednesday 8th June 2022 (Times to meet at the train station to be confirmed closer to the date)
Time	8:00am to 4:00pm
Venue	Aware Super Theatre, International Convention Centre, Darling Harbour
Students/Class	Year 9
Cost of Excursion	No cost
Transport	Train
Supervision	Lauren Rolfe
Students must wear	Full school uniform
Food	Please bring own food and water bottle.
Please bring	N/A
Further Information	This is an inspirational event for secondary students brings a host of speakers together in one room to arm students with the skills of resilience, the strength to stand up to bullying, the keys to motivation, the power of perspective and the benefits of making good and wise decisions. These come together to build hope for the future in these teens, a vital component to their mental wellbeing. For more information go to: https://www.standtallevnt.com/sydney2022

ADDITIONAL INFORMATION

- All students are expected to co-operate fully with school personnel, supervisors, members of the public and others who may be involved in excursion delivery.
- For travel by private motor vehicle an additional permission note is attached.
- Additional information - mandatory for private vehicle, seniors driving, overnight or water activity excursions (see over page if appropriate).
- It is parents/guardian responsibility to ensure safety of their child to and from meeting place if travel is by make your own way.**

Please note: The completion of this form does not automatically imply that your child will be allowed to attend this excursion. If your child has been on Code 3 during the year they may not be allowed to attend. If your child has been on Code 4 or 5 during the year they will not be allowed to attend.

IF A STUDENT MISBEHAVES ON THE EXCURSION THEY FACE THE CONSEQUENCE OF BEING BANNED FROM EXCURSIONS FOR 1 YEAR

PRIVACY ADVICE

The information provided on the Education Excursion Parent / Caregiver Consent / Medical information form for the above excursion is being obtained for the purpose of verifying student consent to participate, acknowledgement of awareness of excursion details and supervision arrangements and gathering relevant medical information (including dietary requirements for student safety purposes. Photographs may be taken of students on this excursion for educational purposes and displayed within the school, on the schools intranet or in the school magazine. If you do not want photographs to be taken of your son/daughter for education purposes, please contact the Teacher-in Charge of the excursion (as above) or the school office on 43293780. It will be used by the NSW Department of Education for the above excursion. If applicable, other persons and/or agencies that will be provided this information are emergency services for the purposes of student safety. 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 the Teacher-in Charge of the excursion (as above) or the school office on 43293780.

Excursion Coordinator: Lauren Rolfe

Relieving Principal: Andrew Skehan



Permission Note For: Stand Tall	Faculty: Welfare	Cost:
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Please complete this consent/medical form and return to the office by: Friday 25th February 2022
(A decision as to the viability of the excursion will be made on this date - If not enough students have paid, this excursion will be cancelled)

I hereby consent to my child _____ to participate in this educational excursion.

Doctor Contact Details

Name: Address:

Doctor's Phone: Mobile:

Parent/Caregiver Details

1. Name: Phone:

2. Name: Phone:

Emergency Contacts

1. Name: Phone:

2. Name: Phone:

List of existing medical conditions / illnesses (include asthma, diabetes, epilepsy, allergies, etc). Outline treatment for each.

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Outline special dietary needs including possible reaction to inappropriate diet.

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Do any medications need to be administered during the excursion? If yes please include name of medication, instructions of administration, time of administration, and any possible reactions.

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I understand that the supervising teacher may seek medical attention for my child.
 THIS MAY INCLUDE TRANSPORTATION, AND ADMITTANCE TO A HOSPITAL.
 I understand that the supervising teacher may return child to school for any disciplinary or safety reasons that may arise. I understand that if a cost is incurred in returning my child to school / home that I will cover any costs and that they may be banned from all excursions for up to 12 months.

Signature of Parent/Caregiver: Date: / /