



HENRY KENDALL HIGH SCHOOL

Principal – Andrew Backhouse

EXCURSION INFORMATION AND CONSENT FORM Local Area Excursion – Gym and Café Visit

Dear Parent/Caregiver

5 November 2015

Your child's class is going on a local excursion to Wyong and Tuggerah on Thursday 12 November 2015. This is a follow up activity after our successful over-night excursion to The Entrance in Term 3.

In the morning, we will visit All-sorts Gym at Wyong. The students had a great fitness session there last time. We will then go to Tuggerah for a café visit and some shopping. This excursion has been planned to support our social skills and independent living programs.

The cost of the excursion is \$ 8.00. The class will depart from school at 10.15am and return to school at approximately 3.00pm. Students are able to catch their usual transport home.

Students will need to bring their own morning tea, water bottle and a hand towel for the gym.

Dress to and from the venue: Full sports uniform. Students not in full sports uniform will not be permitted to attend, this includes suitable footwear.


Travel will be by Wheeling and Able Mini bus.

The group will be supervised by Mrs Bennett and Mrs Secomb

Please complete details below and return with payment by Tuesday 10 November 2015.

N.B No student will attend an excursion if the permission note and payment have not been received prior to the excursion date.

Yours faithfully

Principal: 
Andrew Backhouse

Head Teacher: 
Peter Yates

(This excursion is part of the students' learning program and has the Principal's approval)

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Please return this note with payment to Mrs Bennett or Mrs Secomb

I hereby consent to _____ (student's name) in Year ____ participating in an excursion to _____ on _____. I also give permission for photographs to be taken and published in the school's newsletter and/or school website - **YES / NO** (please circle).

.....
Parent/Caregiver Name (Please print)

.....
Parent/Caregiver Signature

.....
Date

Is your child Anaphylactic

- ☐ No
☐ Yes

Allergic to: _____

Where will the EpiPen be located on this excursion: _____

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

Parent/Caregiver Contact No(s): (on date of this excursion)

Student's Mobile No: