



# HENRY KENDALL HIGH SCHOOL

Principal – Andrew Backhouse

## EXCURSION INFORMATION AND CONSENT FORM

Dear Parent/Caregiver

12 May 2015

As part of the Youth Frontiers program your child \_\_\_\_\_ is required to attend an Orientation Workshop at Gosford RSL on Tuesday 19 May 2015 from 8.30am to 1.00pm.

Dress: Full school uniform.

Students will walk to and from Gosford RSL with Mrs Anderson.

**Please complete details below and return to Mrs Anderson by Friday 15 May 2015. If photos are taken on this excursion, we require your permission to publish these in our newsletter and website. Please indicate below if you give permission.**

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

Teacher: \_\_\_\_\_  
Joan Anderson

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

✂ \_\_\_\_\_

**Please return this note to the Front Office by Friday 15 May 2015**

I hereby consent to my child, \_\_\_\_\_ (student's name) in Year \_\_\_\_\_, attending the "Youth Frontiers Workshop" on Tuesday 19 May 2015 from 8.30am to 1.00pm. 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: \_\_\_\_\_