



HENRY KENDALL HIGH SCHOOL

Principal – Andrew Backhouse

EXCURSION INFORMATION AND CONSENT FORM Year 8 Taronga Zoo Reward Day

Dear Parent/Caregiver

21 September 2016

Your child is invited to attend the 2016 Year 8 Reward Day to Taronga Zoo, Sydney on Wednesday 14 December 2016 as a result of their commendable behaviour and positive attitude throughout the year.

The cost of the excursion is \$33.00. This will include zoo entry and travel by coach.

Students need to be at school by 8.10am and meet at the Library steps.

Itinerary

8.30am	Students depart school
10.30am	Arrive at Taronga Zoo
2.15pm	Depart Taronga Zoo
4.10pm	Arrive at school (after normal buses leave)

Food

Please provide morning tea, water bottle, hat and sunscreen. Students may buy lunch at the venue if they wish but be mindful that it will be expensive.

Uniform

Students will be required to wear their sports uniform to and from the venue.

I have booked 2 coaches with 115 seats available. This excursion will be confirmed for the first 115 students who return the permission notes and full payment. Final Payment **must** be made by Friday 25 November 2016.

Please complete details below and return with payment by Friday 25 November 2016. Unfortunately payments will not be accepted after this date.

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:

Teacher:

Andrew Backhouse

Jason Morris

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

✂

Please return this note with payment to the front office by Friday 25 November 2016

I hereby consent to _____ in Year 8 participating in an excursion to Taronga Zoo, Sydney on Wednesday 14 December 2016. 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:

Faunce Street, Gosford NSW 2250

Telephone: (02) 4325 2110 Fax: (02) 4323 2685

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