

HENRY KENDALL HIGH SCHOOL

Principal - Andrew Backhouse

EXCURSION INFORMATION AND CONSENT FORM Wet 'n' Wild Reward Day

Dear Parent/Care	egiver 31 October 2016
Your child, December 2016 a	has been invited to attend the Year 9 Reward Day at Wet 'n' Wild, Sydney on Friday 9 as a result of their commendable behaviour and a positive attitude throughout the year.
The cost will be \$	660.00 which includes unlimited rides and travel by coach (air conditioned and seat belts).
Itinerary 9.15am 11.15am 6.30pm 8.30pm	Students depart school Arrive at Eastern Creek Point for morning tea and admission Depart Wet 'n' Wild Arrive at school (after normal buses leave)
	rovide morning tea, water bottle, swimmers, towel, hat and sunscreen. Students may buy lunch at the venue if the ful that it will be expensive.
	ked food is allowed to be taken into the venue. Please re-wrap any commercially bought food. The venue ry clear on this issue and may confiscate items.
Uniform – Studen	nts are required to wear their sports uniform to and from the venue.
	coaches with 100 available seats in total. This excursion will be confirmed for the first 100 students who nission note and full payment by Wednesday 7 December 2016. Unfortunately payments cannot be his date.
Please contact m	ne on 4325 2110 if you have any queries.
N.B No student w	vill attend an excursion if the permission note and payment have not been received prior to the excursion date.
Yours faithfully Deputy Principa	Year Adviser: Patricia Muscat
	(This excursion is part of the students' learning program and has the Principal's approval)
0 -	Please complete the details below and return with payment by Wednesday 7 December 2016
involving travel by to make arranger	in Year 9 participating in an excursion to Wet 'n' Wild on Friday 9 December 2016 y coach. My child will agree to abide by the Park's and the Schools Code of Conduct. I understand that I will have ments for my child's travel to and from school. I also give permission for photographs to be taken and published in sletter and/or school website - YES / NO (please circle).
	aregiver Name (<i>Please print</i>) Parent/Caregiver Signature Date
Is your child Anap	phylactic
☐ No ☐ Yes Allergic to: Where will t	he 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: