

∅ Online Form - Community Access Special Education

Activity Name:	Community Access Special Education	
Date/Time:	Friday 8 March 2024 11:40am - 1:40pm	
	• Friday 15 March 2024 11:40am - 1:40pm	
	• Friday 22 March 2024 11:40am - 1:40pm	
	• Friday 29 March 2024 11:40am - 1:40pm	
	• Friday 5 April 2024 11:40am - 1:40pm	
	• Friday 12 April 2024 11:40am - 1:40pm	
	• Friday 3 May 2024 11:40am - 1:40pm	
	• Friday 10 May 2024 11:40am - 1:40pm	
	• Friday 17 May 2024 11:40am - 1:40pm	
	• Friday 24 May 2024 11:40am - 1:40pm	
	• Friday 31 May 2024 11:40am - 1:40pm	
	• Friday 7 June 2024 11:40am - 1:40pm	
	• Friday 14 June 2024 11:40am - 1:40pm	
	• Friday 21 June 2024 11:40am - 1:40pm	
	• Friday 28 June 2024 11:40am - 1:40pm	
	• Friday 5 July 2024 11:40am - 1:40pm	
	• Friday 26 July 2024 11:40am - 1:40pm	
	Friday 2 August 2024 11:40am - 1:40pm	
	Friday 9 August 2024 11:40am - 1:40pm	
	• Friday 16 August 2024 11:40am - 1:40pm	
	Friday 23 August 2024 11:40am - 1:40pm	
	Friday 30 August 2024 11:40am - 1:40pm	
	Friday 6 September 2024 11:40am - 1:40pm	
	Friday 13 September 2024 11:40am - 1:40pm	
	Friday 20 September 2024 11:40am - 1:40pm	
	Friday 27 September 2024 11:40am - 1:40pm	
	Friday 18 October 2024 11:40am - 1:40pm	
	Friday 25 October 2024 11:40am - 1:40pm	
	Friday 1 November 2024 11:40am - 1:40pm	
	Friday 8 November 2024 11:40am - 1:40pm	
	Friday 15 November 2024 11:40am - 1:40pm	
	Friday 22 November 2024 11:40am - 1:40pm	
	Friday 29 November 2024 11:40am - 1:40pm	
	Friday 6 December 2024 11:40am - 1:40pm	
	Friday 13 December 2024 11:40am - 1:40pm	

Decempation.	facilities and businesses including community shopping centres, parks and boardwalks.
Venue:	Central Coast local community facilities
Transport:	Coastability Bus
Dress Code:	Full School Uniform.
Due Date:	Thursday 29 February 2024
Education. I acknowle Health COVID-19 Publ acknowledge and acc participating at this ev	* indicates a required field details and give consent for my child, to attend the Community Access Special dge that this event/activity is required to be held in accordance with any current NSW ic Health Orders and the NSW Department of Education's policies and procedures. I ept that there is a risk that my child may be exposed to COVID-19 whilst attending and tent. I confirm that my child will not attend if displaying any symptoms of illness, and/or inder public health orders. *
Parent/Carer Name: *	
Parent/Carer Phone N	umber: *
Emergency Contact N	ame: *
Emergency Contact Pl	none Number: *
Medical Conditions (in	cluding any medication required):

Special Education students will attend weekly and fortnightly visits to local

Description:

I give permission for my child to be recorded or photographed to promote the event on local and social media: *
○ Yes
○ No
Parent/Carer Signature: *