



Permission Notification Report

2017 YR 4 CAMP GROUP 2

Dates: from 31/10/2017 to 03/11/2017

4B, 4H + 4J

Details of excursion: 2017 YR 4 CAMP GROUP 2

Destination: Forest Lodge Farm, 52 Forest Lodge Road, Jack River 3971

Special needs: The Year 4 students have the opportunity to take part in a 3 night, 4 day Adventure Camp to Forest Lodge Farm in Jack River. Please pack for all types of weather and also bring swimming gear. Further details and a "what to bring" list will follow at a later date. Please note if you are using your CSEF for partial payment, please tick the CSEF box on this form just below the \$ amount and pay balance by BPay, Credit Card, EFTPOS or Cash.

Transport method:

Adult responsible: Mr Robert BIRNIE

Cost: \$320.00

Student details:

Tear off slip

Dear I

NAME: - _____

Please check details on this slip, sign and return to the school no later than the 19/09/2017. GRADE: - _____

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Cost: \$320.00

Medical condition/s:

Access Alerts:

Home telephone:

Home mobile:

business hours telephone:

business hours telephone:

Emergency contact number for this excursion: _____

Doctor name:

Doctor telephone:

Medicare number:

Family has ambulance subscription:

I consent to my child taking part in this excursion and where the teacher in charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher in charge to:

- consent to my child receiving such medical or surgical attention as may be deemed necessary by medical practitioner,
- administer such first-aid as the teacher in charge may judge to be reasonably necessary.

Signature of parent/guardian: _____

Date: _____

The Department of Education and Training requires this consent to be signed for all students attending school excursions.

NOTE: Parents/guardians should provide written approval prior to their child taking part in any excursion.