EXCURSION PERMISSION NOTE

EXCURSION NAME: Yr 7 Gala Day



Dear Parents/Caregivers

Students participate in excursions to support and enhance classroom studies and school programs. Your child is invited to attend an excursion being planned to supplement the work being studied in one of these programs. The principal has approved this excursion. Details are shown below.

| Class/Year/Group involved | Yr 7 | Date: Tuesday | v 23rd October, 2018 |
|---------------------------|---|---------------|--|
| Where to | Soccer – The Hills Centenary Park, Rouse Hill Netball – Kellyville Netball Courts, Rouse Hill Basketball – Stanhope Leisure Centre, Stanhope Gardens Touch – Jonas Bradley Reserve, The Ponds Touch - Peel Reserve, The Ponds | | |
| Payment Due By: | Wednesday 28th September, 2018 | Cost: | \$5 per student to cover bus and venue hire |
| Depart from: | Rouse Hill High School | Return to: | Rouse Hill High School |
| Departure time: | 8:15am | Return time: | 2:57pm |
| Transport arrangement | Bus travel to The Ponds and Stanhope Gardens. Walking to Rouse Hill venues | | |
| Teachers attending | Ms Warrener | | |

Teacher in charge of excursion

Head Teacher

Principal

GENERAL INFORMATION

- 1. Students are required to wear full school PE uniform.
- 2. Please bring hat, sunscreen and water bottles for the day.
- 3. Students will leave from and return to the school.
- 4. Self discipline and high standards of behaviour are expected.
- 5. Please return the following permission note and payment to the Administration Office.

EXCURSION CONSENT FORM EXCURSION NAME: Yr 7 Gala Day

| I hereby consent to | Class: participating in the excursion outlined below. | | | |
|----------------------|--|--|--|--|
| Where: | Soccer – The Hills Centenary Park, Rouse Hill | | | |
| | Netball – Kellyville Netball Courts, Rouse Hill | | | |
| | Basketball – Stanhope Leisure Centre, Stanhope Gardens | | | |
| | Touch – Jonas Bradley Reserve, The Ponds | | | |
| | Touch - Peel Reserve, The Ponds | | | |
| Date: | Tuesday 23rd October, 2018 | | | |
| Travel arrangements: | Bus travel to The Ponds and Stanhope Gardens. | | | |
| | Walking to Rouse Hill venues | | | |
| Cost: | \$5.00 Reference Name: Yr 7 Gala Day | | | |
| | Payment is due by: Friday 28th September, 2018 | | | |
| | I have enclosed the sum of \$in payment. Credit card payments for | | | |
| | amounts over \$10.00 are available. Please see reverse side of this note. | | | |
| | If paying online, please enter the code ' Yr 7 Gala Day ' in the payment description under the category of SPORT . | | | |

| Contact name of parent/guardian: | | Contact phone number: |
|--|---------------------------|-----------------------|
| My child has special need e.g. allergies, medication. | Details of special needs: | |
| Signature of parent/guardian | | Date |

PRIVACY ADVICE

The information requested on your child is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about your child who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Rouse Hill High School.

It will be used by officers of the NSW Department of Education to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

You may correct any personal information provided at any time by contacting the school office.

| Students Name | · | Year: |
|--------------------|--|---|
| Payment for: | Yr 7 Gala Day | Total Payment: \$ |
| | | |
| | Payment: (<i>Please tick one</i>) | box below) |
| 🗆 Cash (e | nclosed with this note) | |
| Cheque 🗆 | (payable to Rouse Hill Hig | h School – enclosed with this note) |
| Credit C | Card | |
| | te that credit card payment phone by calling the scl | nts can only be made in person at the school administration office hool on (02) 9836 1890. |
| Alternative below. | ely credit cards are accep | ted by the Parent Online Payment system on our website – see |
| D Online F | Payment - http://www.rous | ehill-h.schools.nsw.edu.au/ |
| • Pl | lick the link to "Make a Pa lease enter the reference f SPORT. | ayment" name 'Yr 7 Gala Day' in the payment description under the category |
| My Receipt | t number is: | |
| Date | _// | Signed |