

8/10/2018

Gembrook Rd.,
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CONSENT FORM FOR SCHOOL EXCURSION	
Activity: Grade 5/6 Museum Excursion	
Date of Activity: Monday 22 nd , October 2018	Cost: \$ 22.00
Venue: Melbourne Museum	
Departure time: 8:30am	Return time: 3:00pm
Number of parents required: 4 will need to self-drive	
Details: Students will travel by bus and mini bus to the Melbourne Museum. Once there we will be viewing an IMAX show BUGS 3D. Following the movie we will then view the Dinosaur Walk Exhibition and the Bugs Alive Exhibition. Students will also have time for general viewing. Students will then return to school.	
Consent form and money must be returned to school no later than Friday, October 19th	
Teachers attending: Samantha Ladner, Megan Pearton and Ross Woolger	

X.....

CONSENT FORM FOR SCHOOL EXCURSION

I give permission for my child _____ in Grade 5/6_____

to attend Grade 5/6 Museum Excursion on Monday 22nd of October, 2018.

CONSENT TO MEDICAL ATTENTION ON EXCURSION

*Does your child have an allergy medical condition that may require treatment on the day?
Please provide details of the condition and supply relevant medication, to the teacher, on the day, along with dosage details and time of administration. Please ensure the note is signed and dated.*

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 a medical practitioner,
- Administer such first aid as the teacher in charge may judge to be reasonably necessary.

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

On days of extreme weather conditions an excursion may be cancelled at the last minute for safety reasons.

Signature Parent/Guardian _____ Date _____

Phone number for the day: _____

I am able to assist. Name _____ Phone _____