



**PARENT INFORMATION FORM
FOR SCHOOL EXCURSION –
GRADUATION EXCURSION**

Dear Parent/Guardian

I am pleased to provide you with the following details regarding our graduation excursion to the AMF Bowling Centre in Rockingham on **Tuesday 13 December 2016**.

This excursion has been planned to celebrate your child graduating from Golden Bay Primary. It will be a celebration of their journey in education so far.

The cost will be \$31.50 and this includes bus fare, two games of bowling and a meal at the centre.

Students will complete the graduation ceremony and have a short morning tea with their families. The bus will depart at 11.00am. Students will return to school by approximately 2.00pm.

Address of the activity: AMF Bowling Centre, 38 Patterson Road, Rockingham.

Travel will be by bus (Bus Right Charters).

Number of students attending the excursion: 26.

Members of the supervisory team are: Stewart Lillico and Kandie Axell.

Activities to be undertaken: Two games of bowling

Special clothing or other items required: Students will need to be in full school uniform. Students will need to bring their water bottle and they must be wearing shoes and socks.

Contact arrangements during the excursion: Please contact the school on 9583 8800.

Please return the attached Consent Form by Wednesday 7 December. Thank you.

Teacher in Charge

Principal

Date



**PARENT CONSENT FORM
FOR SCHOOL EXCURSION –
Graduation Excursion**

If your son/daughter has special needs please provide full details and include any relevant medical details and updates to be entered on the Student Health Care Summary kept at the school.

If the proposed excursion poses any additional health risks to those identified in the Student Health Care Summary, e.g. if your child suffers from anaphylaxis, there may be risks associated with the provision of meals and storage of an adrenaline auto injector at the appropriate temperature. Please outline all current health risks below:

| Contact Information | | |
|----------------------------|---------|-----------|
| 📞 Home: | 📞 Work: | 📞 Mobile: |
| Other: | | |

I consent for _____ to participate in the excursion, traveling by bus to AMF Bowling in Rockingham on Tuesday 13 December.

I give permission for my son/daughter to receive medical treatment in case of emergency.

I am aware that the school and its employees are not responsible for personal injuries or property damage which may occur on an excursion, unless the school or its employees are proven to be negligent.

Please return to the school by **WEDNESDAY 7 DECEMBER 2016**

Parent / guardian

Date