



## PARENT INFORMATION FORM FOR SCHOOL EXCURSION

Dear Parent/Guardian

I am pleased to provide you with the following details regarding our ADF student's excursion to Comet Bay College.

This excursion has been planned to enable our ADF students to view their ANZAC Museum at Comet Bay College. This will be quite timely as a lot of memorabilia for Remembrance Day will be on display.

There is no cost for this excursion.

The students will walk to Comet Bay High School departing from Golden Bay Primary School at 9.00am and returning to school by 11am.

Members of the supervisory team are: Gill Lofthouse and an Assistant Principal.

Students will need to be in full school uniform and bring a hat and drink bottle.

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

**Please return the attached consent form by 09 November, 2017**

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PETA LAWRENCE  
PRINCIPAL

26 OCTOBER 2017



**PARENT CONSENT FORM  
FOR SCHOOL EXCURSION  
ANZAC MUSEUM – COMET BAY COLLEGE  
16 November, 2017**

**PLEASE RETURN BY THURSDAY 09 NOVEMBER, 2017**

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:

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Contact Information		
Home:	Work:	Mobile:
Other:		

I consent to \_\_\_\_\_ participating in the excursion to  
Comet Bay College – ANZAC Museum on Thursday 16 November, 2017.

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.

\_\_\_\_\_  
Parent / guardian

\_\_\_\_\_  
Date