



SCHOOL EXCURSION / INCURSION NOTIFICATION

Dear Parent/Caregiver, an excursion/activity has been organised for your child.

Excursion / Incursion	Term 4 Recreational Sport
Date	Thursday 17th November 2022 - Thursday 15th December 2022 (Students will be leaving the school at the beginning of Lunch at 12pm. Students will meet at the front of the school.)
Year / classes involved	Year 7-10
Location	Penrith Rock Climbing Centre, Flipout, AMF Bowling and Laser Tag, Plus Fitness Gym
Purpose	Recreational sport is an optional sport section for the students in years 7-10. This is a good opportunity to do recreational sport on Thursdays at local venues in the Penrith area.
Start time	12:00pm
End time	2:10pm
Transport	School Bus. The bus leaves at the front of the school at the beginning of lunch.
Cost	\$30.00
Dress requirements	Sports Uniform
Food	N/A
Equipment	Entry money for each sport. Flipout- \$8 Bowling and Laser Tag- \$8 per game Rock Climbing- \$8 Gym- \$5
Organising teacher	Jessica Mansell
Teachers attending	Jessica Mansell
Additional information	N/A
Consent Form and Payment due to Office by	Tuesday 15th November 2022

General Information Concerning Excursions / Incursions

1. Excursions and Incursions form an integral part of the curricula by providing enriching experiences which cannot be provided in the classroom.
2. Students must wear full school uniform unless otherwise instructed above. Students who are not in uniform will not be allowed to attend.
3. A standard of behaviour is expected of all students representing the school in the greater community.
4. Please note the time and place of departure and return, as advised above.



EXCURSION / INCURSION PERMISSION FORM

Please return this permission form with your payment to the Office

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Location	Penrith Rock Climbing Centre, Flipout, AMF Bowling and Laser Tag, Plus Fitness Gym
Cost	\$30.00
Organising Teacher	Jessica Mansell

I give permission for (student name) _____

of year/class _____ to participate in this excursion / incursion.

I have noted the start and end times and dress requirements.

Additional needs of my child of which you should be aware: eg. allergies or medical conditions

Medical Assistance: In the event of any accident or illness, I authorise the teacher in charge to seek medical assistance or treatment for my child at my cost.

Parent signature: _____

Parent name: _____

Parent phone number: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

PAYMENT OPTIONS

Parent Online Payment through the school website and click on *Make a Payment*.
Enter excursion / incursion name in the payment description under *Excursions*.

Receipt # _____ *Date paid:* _____

Cash (correct amount please)

Cheque (payable to *Cranebrook High School*)

- **Please return this consent form with your payment to the Office**
- **Tear off and keep previous page for your information**