Dear Parents,

NOTIFICATION OF EXCURSION

Information on an excursion, which has been organised for your daughter’s class, appears below. Would you please read it, complete the permission slip and return it to your daughter’s History teacher.

<table>
<thead>
<tr>
<th>Subject</th>
<th>History</th>
<th>Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rationale for Excursion</td>
<td>To enable the Year 7 students studying Ancient societies to take part in an archaeological dig and view artefacts.</td>
<td>7.2, 7.4, 7.6, 7.8</td>
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<tr>
<td>Date of Excursion</td>
<td>Friday 10th March, 2017 (Term 1, Week 6)</td>
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</tbody>
</table>
| Venue:                      | 9.30-11.30: The ‘Big Dig’ Archaeological site, YHA The Rocks: 7.2; 7.4  
Nicholson Museum, University of Sydney: 7.6; 7.8  
12.00-2.00: The Big Dig: 7.6; 7.8  
Nicholson Museum: 7.2; 7.4 |
| Travel Arrangements:        | Depart From:  
Line up at Bus Bay  
Depart | At 8.00a.m.  
8.15a.m. |
| Return to:                  | Catherine McAuley | At 3.10 p.m. |
| Transport by                | Bus |
| Dress:                      | Sports uniform, hats, sunscreen, bottled water, excursion bag |
| Lunch:                      | Bring own lunch |
| Cost:                       | On school fees |
| Final Date for note:        | Friday 3 March, 2017  
Unless the permission note is received by the due date, students cannot attend the excursion. |
| Date Issued:                | Week 3 |
| Teacher(s) in Charge:       | Ms S. Colling | School Contact No: 9849 9100 |

Students are expected to abide by the School Behaviour Code  
Students not attending this excursion must attend school for supervised work  
Please fill out the sheet attached and return it to your history teacher

Yours sincerely,

Ms D. Grignon  
Assistant Principal  
(Pastoral Care/Administration)

Ms S. Colling  
History Co-ordinator
PARENT/GUARDIAN CONSENT FORM

Student's name: ___________________________ Homeroom: __________

Name of Excursion: ___________________________ Date: __________

As a Parent/Guardian of ____________________________________________

I, ___________________________, give my consent for her to participate in the school excursion as detailed in the attached information sheet. I am aware of the nature of the excursion, the activities which may involve risk.

I accept that the teachers and or instructors will take appropriate disciplinary action necessary to ensure the safety, well-being and successful conduct of the students who participate in the activities associated with the excursion.

In the event of any illness or accident, I consent for the teachers to administer any first aid treatment which in their discretion is considered necessary. I authorise the obtaining of such medical assistance as my daughter may require. I accept all medical treatment and the responsibility for payment of any expenses thus incurred.

I include the completed medical information section (below) about my daughter to assist those who are organising the excursion.

Signed: ___________________________ Date: __________

(Parent/Guardian)

Emergency contact phone number for excursion day: ____________________________

Medical Information:

Does your daughter have any medical condition or disability which may affect her participation in the school excursion or in some of the activities on this excursion? Yes / No
If Yes, please give details:

______________________________________________________________

Is your daughter on any prescribed medication(s) which she will be taking during the excursion? Yes / No
If Yes, please give details:

______________________________________________________________

Does your daughter have any allergies (eg. insect bites, food)? Yes / No
If Yes, please give details:

______________________________________________________________

Does your daughter have any special dietary requirements (vegetarian, gluten free)? Yes / No
If Yes, please give details:

______________________________________________________________

Is there any other information you would like to give which, in your view, may affect your daughter's participation in the excursion? Yes / No
If Yes, please give details:

______________________________________________________________