



SCHOOL EXCURSION / INCURSION NOTIFICATION

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

Excursion / Incursion	2023 Universal Robotics Challenge
Date	Friday 1st December 2023
Year / classes involved	Students from the Robotics Club
Location	Australian College of Physical Education
Purpose	Face to Face Division
Start time	8:30am
End time	5:30pm
Transport	Students meet at Greystanes High School and will travel to Australian College of Physical Education. Students will be driven to the venue and back to Greystanes High School on the mini bus and supervising teacher's car. Parents to pick-up their child from school.
Cost	\$5.00 - Payable at D Block Office
Dress requirements	Full sports uniform.
Food	Students to bring their own food for the day. Canteen available for students to purchase food.
Equipment	Back pack, water bottles, hats, sunscreen and umbrella (if needed).
Organising teacher	Gurpreet Kaur
Teachers attending	Gurpreet Kaur, Sylvia Zajkowska
Additional information	N/A
Emergency Contact Number	0434 664 198
Consent Form and Payment due to Office by	Tuesday 28th November 2023

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

Excursion / Incursion	2023 Universal Robotics Challenge
Date	Friday 01/12/2023 8:30am - 5:30pm
Location	Australian College of Physical Education
Cost	\$5.00 - Payable at D Block Office
Organising Teacher	Gurpreet Kaur

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: _____

Parent/Carer Acknowledgement:

• I can confirm that I understand that, in the event of injury, no personal injury insurance cover is provided by the NSW Department of Education for students in relation to school activities.

• In the event of any accident or illness, I authorise the obtaining, on my behalf, of an ambulance and any such medical assistance that my child/ward may require. I accept full responsibility for expenses incurred.

Student Name: _____

Parent Name: _____

Parent Signature: _____

Date: _____

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