



# Scarborough Primary School

An Independent Public School

## PARENT INFORMATION AND CONSENT FORM FOR SCHOOL EXCURSION TO MR STINK THEATRE PRODUCTION

Dear Parent/Guardian

I am pleased to provide you with the following details regarding our excursion to: Mr Stink production at the Heath Ledger Theatre on Thursday 11 May 2017

This excursion has been planned as part of the English curriculum: students will be completing a viewing assessment, comparing the performance to the book which will be studied in class.

The cost of the excursion is \$25

The class will depart from Scarborough Primary School at 11am

and return to Scarborough Primary School at 2.30pm

Travel will be by public transport (bus and train)

Number of students attending excursion: 20

Members of the supervisory team are:

Erica Salt and Annie Clark

Special clothing or other items required:

- Full school uniform

Contact arrangements during the excursion: through the school on 9341 1202

Kind regards

ERICA SALT  
Acting Principal  
20 March 2017



**PLEASE DETACH AND RETURN FORM AND PAYMENT BY 31 March 2017**

If your child's health needs or medical condition has changed from those recorded on your child's Student Health Care Summary at the time of their enrolment, please provide full details below

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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 additional health risks below.

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**CONTACT INFORMATION – please ensure form is completed in full**

 Home phone number	 Work phone number	 Mobile phone number
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I consent to \_\_\_\_\_ participating in an excursion to Heath Ledger Theatre on Thursday 11 May 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.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

**Payment Details**

(please tick one box)

- Cash – please return permission form and payment in an envelope with child's name on the front and place in excursion/incursion box in the front office before the due date.
- Cheque - please return permission form and payment in an envelope with child's name on the front and place in excursion/incursion box in the front office before the due date.
- Direct Debit - (Commonwealth Bank BSB 066-040, Account Number 19 900 233) - please include receipt/reference number \_\_\_\_\_

***Direct Debit payments must be made before due date. Permission form should be returned to the excursion/incursion box in the office before the due date. Please don't return form until payment has been made as form will be returned to you if a receipt/reference number is not supplied.***