



📄 Online Form - Year 4 Excursion - Expression of Interest

<b>Activity Name:</b>	Year 4 Excursion - Expression of Interest
<b>Date/Time:</b>	Wednesday 11 September 2024 9:00am - Friday 13 September 2024 2:30pm
<b>Description:</b>	Our Year 4 Excursion to Coffs Coast Adventure Centre is currently being organised and in order to confirm numbers, we are requesting a \$50 deposit from students wishing to attend before Thursday 28th March 2024.
<b>Cost:</b>	\$380.00
<b>Venue:</b>	Coffs Coast Adventure Centre (226 Bonville Station Rd, Bonville, NSW 2450)
<b>Overnight Location:</b>	Coffs Coast Adventure Centre
<b>Transport:</b>	Bus
<b>Additional Information:</b>	<p>The cost includes travel to and from the venue, accommodation, all meals and activities. It also includes entry to Coffs Coast Wildlife Sanctuary and the National Marine Science Centre.</p> <p>Activities at the Centre include Commando Course, Giant Swing, Sky Wire, Laser Tag, Z-ball, Capture the Flag and Minute to Win It.</p> <p>External Activities include visiting the Coffs Coast Wildlife Sanctuary and the National Marine Science Centre.</p> <p>You may elect to make part payments online via the School Bytes app or at the office throughout the year after making the initial deposit. Please note that students behaviour must be deemed as satisfactory otherwise they will not be invited to attend the excursion. A full refund will be paid if this is the case. Further information including a detailed agenda, packing list, medical forms and permission notes will be forwarded closer to the excursion date. Please either complete your expression of interest online via the School Bytes app or sign the paper version and return to your classroom teacher before Thursday 28th March 2024.</p> <p>Parent/Carer Acknowledgment and Consent</p> <ul style="list-style-type: none"> <li>● I have read the information provided and I hereby consent to my child participating in this event.</li> <li>● I acknowledge that this event/activity is required to be held in accordance with</li> </ul>

	<p>any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures.</p> <ul style="list-style-type: none"><li>● I confirm that my child will not attend if displaying symptoms of illness and to the best of my knowledge, my child has no medical condition or injury that places them at risk by participating in this sport or activity.</li><li>● I acknowledge students' behaviour must be exemplary for them to attend this event. Students must comply with SGPS student behaviour policy and NSW Public Schools behaviour code for students.</li><li>● I acknowledge that if my child sustains a concussion, or experiences any concussion symptoms, in the 14-day period prior to the event commencing, I am required to report this to the school. I further acknowledge that, should this occur, my child will only be permitted to participate in the event, if a medical clearance is provided.</li></ul>
<b>Due Date:</b>	Thursday 28 March 2024

\* indicates a required field

I have read the above details and give consent for my child, to attend the Year 4 Excursion - Expression of Interest \*

Yes  No

**Student Name:**

**Parent/Carer Name: \***

**Parent/Carer Phone Number: \***

**Emergency Contact Name: \***

**Emergency Contact Phone Number: \***

**Medical Conditions (including any medication required):**

**Dietary Requirements:**

**Parent/Carer Signature: \***

**Please note:** Once you have submitted this consent form, payment can be made via the 'Make Online Payment' button located on this page.