



29/5, 5/6, 19/6

STRENGTH THROUGH UNITY

Dear Parent/Guardian,

Today's Date: 11/05/2017

Below are the details of an upcoming Excursion / School Activity involving your child:

Excursion Name: Year 9 ATSI Students Transition Program		Group: ATSI Year 9
Destination: BWSC Woy Woy	Dates: 29 th May, 5 th June 19 th June 26 th June Term 4 dates TBA	Cost: \$0

NOTE ONLY

All notes and payments (or advice of online receipt number) must be returned to Student Reception and finalised by		Date: 19 th May
Organising teacher: A Cox, M Goolagong, A Freeman	Email: angela.cox@det.nsw.edu.au	

****BWSC Umina has completed a Risk Assessment for this excursion which can be provided to parents if requested****

Excursion description: Year 9 ATSI students, as part of Year 9 in to Year 10 Transition

Privacy Advice Notice: The information provided on your child is being obtained by the School for the purpose of ascertaining relevant medical information requirements and other health-care related needs about your child who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Brisbane Water Secondary College. It will be used by Officers of the NSW Department of Education and Training to assist planning, to support students and to minimise risks when conducting school excursion, sporting or other activities. Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity and persons that may be called upon to provide health-care treatment or other assistance during or as a consequence of such excursions or activities. Provision of this information is not required by law. However, a failure to provide the information may mean that your child cannot participate in a particular excursion or school activity. In such circumstances, the school will make available a sound alternative educational experience. Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the School Principal to discuss further. You may correct any personal information provided at any time by contacting the School office.

**** Important Note: Whilst excursion refunds will only be given in extenuating circumstances, NO refund will be given for bus costs ****

Departure details:	Time: 8.40am	Location: Front Office BWSC Umina
Return details:	Time: 10.40am	Location: Front Office BWSC Umina
Transport:	Travel by: BUS	
Dress Requirements:	School Uniform	Other Requirements: Water Bottle

Angela Cox Excursion Co-ordinator Warrick Bateman Deputy Principal

Year 9 ATSI Transitions Permission Note

Student name: _____ Roll call class: _____ Sub Dissection Code: insert code

I hereby consent to my child attending the Year 9 ATSI Excursion on the above dates and travelling by bus to and from the venue. I consent to paying the cost of insert cost of excursion and understand that it is an extra-curricular activity and that all elective fees must be paid prior. I consent to my child being responsible for completing missed work whilst participating on this excursion and for demonstrating appropriate behaviour.

Emergency Contact name: _____ Emergency Contact Ph number: _____

Signed: _____ Date: _____

Medical condition (circle if applicable) Asthma Anaphylaxis Allergies Other :

Does the medical condition indicated, require an action plan? YES / NO Medicare Number :

Online payment receipt number Amount : \$0

*Proceed to BWSC Umina website (Make a Payment)

Office Use only:
Sub Dissection Code:

