



Dear Parent/Guardian,

Today's Date: 6/2/2018

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

Excursion Name:	Practical Snorkelling Assessment		Class/Group:	Outdoor Ed./ Marine Studies	
Destination:	PLC Woy Woy	Date:	OEd 1 16/3/2018	Cost:	\$0 (if fees paid \$10 if not)
			OEd 2 20/3/18		

<i>All notes and payments (or advice of online receipt number) must be returned to Student Reception and finalised by:</i>		Date:	26/2/2018
Organising teacher:	J Gosden	Email:	joel.gosden3@det.nsw.edu.au
<p>**BWSC Umina has completed a Risk Assessment for this excursion which can be provided to parents if requested**</p> <p>Excursion description: students will depart from BWSC Umina Campus at 12:10pm via bus to the PLC Woy Woy. There they will complete a Practical Snorkelling assessment.</p> <p>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.</p>			

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

Departure details:	Time: 12:10pm	Location:	BWSC Umina
Return details:	Time: 2:40pm	Location:	BWSC Umina
Transport:	Travel by: Bus		
Dress Requirements:	PE Uniform	Other Requirements:	Students will change into their swimmers (appropriate) at the PLC. They will also require a towel and are encourage to bring their own snorkel, mask and flippers. The school will provide these for the students with limitations on sizes

J. Gosden

Excursion Co-ordinator

A. Jackson

Head Teacher

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UMINA NSW 2257

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WOY WOY NSW 2256

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To Be Completed for Overnight Excursions and All Water Activities Only

Check boxes to indicate the sections to be completed and signed by parent/caregiver and returned to Student Reception by 6/03/2018

Water or swimming activities - advice

The excursion will involve the following water or swimming activities: name activities _____

These activities will take place at: name place _____

The school will provide the following flotation devices to students who may require assistance in the water: list devices _____

Water or swimming activities - parent/caregiver response

In relation to the proposed water or swimming activities, I advise that my child is a: *(please tick one)*

strong swimmer
 average swimmer
 poor swimmer
 non-swimmer

I advise that my child requires the following flotation device to assist him/her in the water: _____

I undertake to provide this device so that my child can participate in the excursion. **Yes / No**

I **give / do not give** permission for my child to participate in the water or swimming activities.

Parent/Caregiver Signature: _____

Practical Snorkelling Excursion Permission Note

Student name: _____

Roll call class: _____

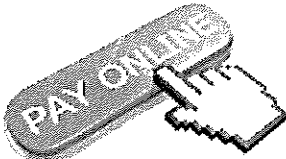
I hereby consent to my child attending the Practical Snorkelling Excursion on 16/3/2018 (OEd 1) 20/3/18 (OEd 2) and travelling by bus to and from the venue. I consent to paying the cost of \$0 (if fees, \$120, paid) and understand that it is an extra-curricular activity and that all elective fees must 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: Asthma Anaphylaxis Allergies (circle if applicable)	Other : _____
Does the medical condition indicated, require an action plan? YES / NO	Medicare Number : _____
	Online payment receipt number : _____ Amount : \$ _____
Sub Dissection Code: insert code _____	
*Proceed to BWSC Umina website (Make a Payment) (Only complete fields with green asterisk)	