



Turrumurra High School
Maxwell Street
Turrumurra NSW 2074
02 9449 4233
turrumurra-h.school@det.nsw.edu.au

SCHOOL EXCURSION / INCURSION NOTIFICATION

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

Excursion / Incursion	Year 7 - Debate 3
Date	Tuesday 13th October 2020
Year / classes involved	Year 7 Debating Team
Location	Turrumurra High School (Maxwell St, South Turrumurra NSW 2074)
Purpose	Round 3 debate with Hunter's Hill High School
Start time	9:15am
End time	12:00pm
Transport	
Cost	\$10.00
Dress requirements	
Food	
Equipment	
Organising teacher	Rebecca Howland
Teachers attending	Rebecca Howland
Additional information	
Consent Form and Payment due to Office by	24th September 2020

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. This excursion/incursion has the approval of the principal. A risk management plan has been submitted to the principal as part of the excursion planning.
3. Students must wear full school uniform unless otherwise instructed above. Students who are not in uniform will not be allowed to attend.
4. A standard of behaviour is expected of all students representing the school in the greater community.
5. Please note the time and place of departure and return, transport arrangements, uniform requirements and food as advised above.

Mr David Arblaster
Principal



EXCURSION / INCURSION PERMISSION FORM

Please return this permission form with your payment to the Office by 24th September 2020

Excursion / Incursion	Year 7 - Debate 3
Date	13/10/2020 9:15am - 12:00pm
Location	Turrumurra High School
Cost	\$10.00
Organising Teacher	Rebecca Howland

I give permission for (student name) _____

of year/class _____ to participate in this excursion / incursion.

I have noted the start and end times, transport arrangements 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: _____

PAYMENT OPTIONS

Parent Online Payment through the school website and click on *Make a Payment*.
Enter excursion / incursion name in the payment description under *Excursions*.

Receipt # _____ *Date paid:* _____

Cash (correct amount please)

Cheque (payable to *Turrumurra High School*)

International student

Please use the credit in my account

- **Please return this consent form with your payment to the Office by 24th September 2020**
- **Tear off and keep previous page for your information**