



# WARNERS BAY HIGH SCHOOL



QUALITY EDUCATION FOR ALL

## Excursion Letter to Parents/Caregivers

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

<b>Excursion/Activity</b>	U15's Rugby League - Country Cup
Excursion Description	U15's Rugby League - Country Cup
Faculty	N/A
Date(s)	Tuesday 21/05/2024 9:00am - 1:30pm
Venue	Lakeside Sporting Complex, Raymond Terrace
Students/Class	u15's Rugby League Boys
Cost of excursion	\$5.00
Transport	Students must make their own way to and from the venue.
Supervision	Nick Farrar
Please bring	Football boots, mouth-guard, headgear (optional), shorts, socks and strapping tape (if required).
Students must wear	Full School Sports Uniform
Food	No facilities to purchase food will be available. Please bring water bottle. Please bring recess and lunch.
Additional information	Lakeside AS

Nick Farrar  
Teacher in charge

Marcus Neale  
Principal

### Medical Disclaimer

Please note there is no personal injury insurance cover provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity. Parents and caregivers are advised to assess the level and extent of their child's involvement in the sport program offered by the school, zone, area, and state school sport associations when deciding whether additional cover, above that provided by Medicare, is required. The NSW Supplementary Sporting Injuries Benefits Scheme, funded by the NSW Government, covers any injury resulting in the permanent loss of a prescribed faculty or the use of some prescribed part of the body.

**Note:** Extra/co-curricular excursions/activities are a privilege which provide students with an opportunity to further develop knowledge and skills learnt in class. Students who do not meet with school expectations for participation in learning and/or behaviour may not be allowed to participate. Attendance will be at the discretion of the Principal.



**Excursion:** U15's Rugby League - Country Cup  
**Date:** Tuesday 21/05/2024 9:00am - 1:30pm  
Return this portion to the front office by Thursday 16 May 2024

**Faculty:** N/A  
**Cost of Excursion:** \$5.00

I give permission for my child ..... of Year ..... to attend the excursion/activity above.

My child's medical details have **NOT** changed.

My child's medical details **HAVE** changed. My child's updated medical details are attached. **Note: It is the responsibility of the parent/caregiver to notify the school when their child's medical details change.**

### Payment Method (Payment must accompany this permission form):

**Cash / Cheque:** \$ ..... enclosed  **Online payment:** Amount paid: \$ ..... Receipt number .....

Signed ..... (Parent/Caregiver) Date .....