

## WARNERS BAY HIGH SCHOOL

"Quality Education for All"



## Excursion Letter to Parents/Caregivers

Excursion / Activity	French Film Festival		
Educational Reason	Watch a French Film and experience French Cuisine		
Date(s)	Friday, 1 May 2020		
Time(s)	9.15m — 1.50pm		
Venue	Event Cinemas Kotara & Euro Patisserie		
Students/Class	8 French, 10 French, 11 French		
Cost of Excursion	\$35.00		
Transport	Bus		
Teacher(s) in charge	Ms R Tamas		
Please bring	Water Bottle		
Students must wear	School Uniform		
Note: Extra and Co-Curricular Excursions are a privilege which provide students with an opportunity to further develop knowledge and skills learnt in class. Students who are not compliant with school expectations for participating in learning and/or uniform and/or behaviour will not automatically be allowed to participate in excursions. Attendance will be at the discretion of the Principal.			
Food	3 items (drink, main and desert) provided		
Additional information	Allergen- free food may be provided		
Ms R Tamas Teacher in charge of Excursion  Medical Disclaimer: Parents – please note there is no personal injury insurance cover provided by the NSSW Department			
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 and injury results in in the permanent loss of a prescribed faculty or the use of some prescribed part of the body.			
Excursion: French Filr	m Festival	Year 8, 10 and 11 French	
		Cost = \$35.00	
keturn this portion to the	front office by Monday 27 April 2020		
$\square$ I give permission for my child of Year to attend the excursion/activity above.			
My child's medical details have <b>NOT</b> changed.			
My child's medical details <b>HAVE</b> changed. My child's updated medical details are attached.			
NOTE: It is the responsibility of the parent/carer to notify the school when their child's medical details change.			
Payment method: (payment must accompany this permission form)			
Cash / Cheque: \$ enclosed Online: Amount paid: Receipt number:			

Signed: ..... (Parent/Caregiver)

Date: .....

Phone: 02 4954 9488