

WARNERS BAY



QUALITY EDUCATION FOR ALL

Excursion Letter to Parents/Caregivers

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

Excursion/Activity	NAIDOC Activity Day	
Excursion Description	Aboriginal and Torres Strait Islander students are invited to participate in an Activity Day centered around the 2024 NAIDOC theme. Students will start the day by learning more about the theme 'Keep the Fire Burning - Blak, loud and proud'. They will then be creating an artwork which represents what the theme means to them. These artworks will be included as part of our NAIDOC Assembly in Term 3.	
Faculty	Aboriginal Education	
Date(s)	Wednesday 03/07/2024 9:10am - 3:10pm	
Venue	Warners Bay High School	
Students/Class	Aboriginal and Torres Strait Islander students.	
Cost of excursion	Nil cost to students	
Transport	N/A	
Supervision	Skye Bedforth, Amanda Lawler	
Please bring	N/A	
Students must wear	Full school uniform.	
Food	Please bring recess and lunch.	
Additional information	N/A	
ther school activity. Parents and c port associations when deciding w Government, covers any injury resu	aregivers are advised to assess the level and extent of their child's in thether additional cover, above that provided by Medicare, is require ulting in the permanent loss of a prescribed faculty or the use of som	Marcus Neale Principal If or students in relation to school sporting activities, physical education lessons or any involvement in the sport program offered by the school, zone, area, and state school at. The NSW Supplementary Sporting Injuries Benefits Scheme, funded by the NSW be prescribed part of the body. If of further develop knowledge and skills learnt in class. Students who do not meet with the state of the s
chool expectations for participation	n in learning and/or behaviour may not be allowed to participate. Atte	
Excursion: NAIDOC Activity Day Faculty: Abort		Faculty: Aboriginal Education Cost of Excursion: Nil cost to studen
☐I give permission for my child	of Year	to attend the excursion/activity above.
My child's medical details have	ve NOT changed.	
My child's medical details HA school when their child's		Note: It is the responsibility of the parent/caregiver to notify the
Signed	(Parent/Caregiver) Date	