

Cardiff High School

Celebrating Excellence, Opportunities and Success.

30 Boronia Street, Cardiff NSW 2285

Ph (02) 4954 9966

Email cardiff-h.school@det.nsw.edu.au

Website www.cardiffhigh.com.au

Excursion Information for Students and Parents/Carers

Dear parent/caregiver,

Your child has been invited to attend the following excursion:

Student Group: Lorikeet Class

Venue: The Auditorium Callaghan College Jesmond Senior Campus

Purpose of Excursion:

For students to attend and perform at IOTAS Annual Combined Schools Concert.

Date(s): Wednesday 07 December 2022

Departure Time: 9:30 am **Departing from:** Cardiff High School

Returning Time: 2:00 pm **Returning to:** Cardiff High School

Transport: Private transport with staff.

Attire to be worn: School Uniform

Cost: N/A

Payment Instructions: N/A

Payment Due by: N/A

Additional Information:

Students will be performing the Open Day Performance at the IOTAS Concert and they will need a flannelette shirt and jeans (as per the Open Day Performance costume).

Students will need a packed lunch for the day as there is no canteen provided.

Organising teacher: Elisha McDermott

Additional Staff: Daina Hissey Jen Scheers Wade Lambert

Emergency Contact: 49549966

It is expected that all students adhere to our code of behaviour at school and on excursions. Further information on the code of behaviour is available at www.cardiffhigh.com.au, Payments and Excursions.

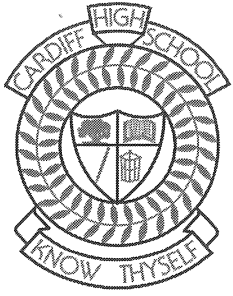
Please sign the attached permission and medical information form and return it with full payment

to Organising teacher _____ by Wednesday 30 November 2022 _____.

Elisha McDermott
Organising Teacher

Daina Hissey
Head Teacher

Joshua Gane
Principal



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Excursion Permission and Medical Form

I hereby consent to my child (Full Name) _____ of (Roll) _____ to participate in an excursion for Lorikeet Class to The Auditorium Callaghan College Jesmond Senior Campus on Wednesday 07 December 2022 organised by Elisha McDermott.

I understand transport is via Private transport with staff, the cost of the excursion is N/A payment is due by N/A and students should wear School Uniform.

My child's mobile phone number is _____.

I am paying:

- Online via www.cardiffhigh.com.au. Receipt number _____ Date paid _____.
- At the school office.
- At the venue.
- N/A

I give permission for my child to receive medical treatment in the case of an emergency.

Emergency Contact details:

First Contact

Name: _____

Phone: _____

Alternate Contact

Name: _____

Phone: _____

Doctor

Name: _____

Phone: _____

Existing medical condition(s) or illnesses (please tick)

asthma diabetes epilepsy other(s) _____

allergies to _____

Medication(s) to be administered and / or treatment(s) for condition(s). Name of medication(s), instructions for administration, time(s), any possible reactions and / or outline treatments for condition(s).

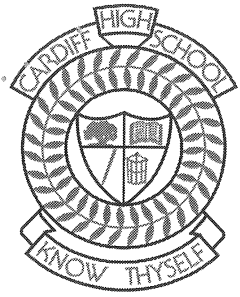
Special needs or dietary requirements. Include possible reaction to inappropriate diet.

*The information you provide is being obtained for the purpose of ascertaining relevant medical information. For further information on the Privacy Policy see www.cardiffhigh.com.au **Payments and Excursions**.*

Parent/Carer (print name): _____

Date: _____

Parent/Carer (signature): _____



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Travel by Motor Vehicle – Student Passenger in Car Driven by Staff

Completion of this form is required if parents' consent to their child traveling in a specified private motor vehicle driven by a staff member for the purpose of travelling to and from school approved activities.

Conditions of travel in private motor vehicles where students are a passenger to and from school activities:

1. No student may travel as a passenger in a car driven by a staff member to or from approved school activities without written parental consent.
2. Drivers are expected to conform to the road rules at all times and ensure the number of passengers in the vehicle does not exceed the number of seatbelts.
3. Drivers must hold a valid driver's licence.
4. Vehicles being driven have current registration and comprehensive insurance. A copy is on file with the school.

I hereby consent to my child (Full Name) _____
to travel as a passenger in a vehicle driven by a Cardiff High School staff member for the purpose of
travelling to and from
IOTAS Annual Combined Schools Concert
which is a school approved activity in accordance with the conditions set out above.

Parent/Carer (print name): _____

Date: _____

Parent/Carer (signature): _____