

Gembrook Rd.,  
 Cockatoo 3781  
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<b>CONSENT FORM FOR SCHOOL EXCURSION</b>	
<b>Activity: Tree planting at Cockatoo for Grade 3/4s</b>	
<b>Date of Activity: Wednesday 7<sup>th</sup> November</b>	<b>Cost: Free</b>
<b>Venue: Cockatoo Creek near St Lukes church</b>	
<b>Departure time: 9.30am</b>	<b>Return to Cockatoo Primary: 3.00pm</b>
<p><b>Details: Students will walk to Cockatoo Creek. Once at the planting site they will participate in a tree planting and environmental education day.</b></p> <p><b>This day is a fantastic opportunity for all of the grade 3/4s to have hands on experiences in revegetating bush reserves and to have fun. Students will need to bring a packed lunch and snack and drink bottle. NO LUNCH ORDERS WILL BE AVAILABLE ON THIS DAY.</b></p>	
Consent form must be returned to school <b>no later than Friday 4<sup>th</sup> November</b>	
<b>Teachers attending: Shane Pearton, Tim Stapleton and Jutta Burgstahler</b>	

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**CONSENT FORM FOR SCHOOL EXCURSION**

I give permission for my child \_\_\_\_\_ in Grade \_\_\_\_\_

to attend Grade 3/4 Tree planting at Cockatoo Creek on Wednesday 7<sup>th</sup> November, 2018.

**CONSENT TO MEDICAL ATTENTION ON EXCURSION**

*Does your child have an allergy  medical condition  that may require treatment on the day?  
 Please provide details of the condition and supply relevant medication, to the teacher, on the day,  
 along with dosage details and time of administration. Please ensure the note is signed and dated.*

Where the teacher in charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher in charge to:

- Consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner,
- administer such first aid as the teacher in charge may judge to be reasonably necessary.

The Department of Education requires this consent form to be signed for all students attending school excursions.

*On days of extreme weather conditions an excursion may be cancelled at the last minute for safety reasons.*

Signature Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Phone number for the day: \_\_\_\_\_