

TUMUT HIGH SCHOOL

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5th November 2019

Dear Parent / Caregiver

In recognition of your child's positive behaviour at school they are eligible to participate in a Year excursion to Wagga Wagga on Friday, 29th November 2019. Students will experience 2 exciting activities at Airborne Gymnastics and Oasis Aquatic Centre.

While at Airborne Gymnastics students will engage in a structured gymnastics session under the supervision of qualified staff. Oasis lifeguards will also be on duty at the Aquatic Centre.

Students must bring a packed lunch including snacks and a drink. Transport will be by coach provided by Goode's Coaches, departing from Tumut High School bus shelter at 9.00am and returning at 3.00pm.

Mr Somerville will be the supervising teacher. He will be accompanied by Mr Hughes, Mrs Beale and Mrs Pearce.

The cost of this activity is \$20.00 which covers transport and activity fees. Please note that the cost of this activity has been subsidised with departmental RAM funding.

A risk assessment has been prepared for this activity and the risk has been assessed as 'low-medium'. A copy of the risk assessment is available on request.

Please complete the permission slip below and return it with payment to the school office by the end of recess on Wednesday, 20th November 2019 so that transport arrangements can be finalised. Late payments cannot be accepted.

Students wishing to be picked up in Adelong will need to be at Beaufort House 10 minutes after the scheduled departure time from Tumut High School.

Yours faithfully

Mr A Somerville

Head Teacher Wellbeing

Mr D Dixon Principal

Please return this permission note to the office by the end of recess, Wednesday, 20th November 2019

Year 7 PBL Excursion – Airborne Gymnastics and Oasis Aquatic Centre, Wagga Friday, 29th November 2019 (339930) \$20.00

I give permission for Wagga Wagga on Friday, 29 th November 2019.	to go on the Positive Behaviour Excursion to
	the conditions of eligibility for this activity, as outlined in the n provided by Goode's Coaches. The co-ordinating teacher of d by Mr Hughes, Mrs Beale and Mrs Pearce.
Medical Conditions:	
Medication/Action required:	
Will your child have this medication with them? Yes,	/ No / Not applicable
I give / do not give permission for my child to receive	e medical treatment in the event of an emergency.
☐ I would like my child to be picked up and dropped	d off in Adelong.
Parent / Caregiver Name:	Signature:
Contact Telephone No:	Date: