



Bull Creek Primary School Parent Consent Form

Dear Parents,

The following excursion has been organised and it would be appreciated if you would read the contents carefully. Please complete the attached consent form and return it, together with any appropriate costs, to the school office.

Please remember that it is this school's policy that if money has not been received by the due date it is presumed that your child is not attending. Thank you for your support.

Activity	Aviation Heritage Museum Visit	
Venue Details	Aviation Heritage Museum – Bull Creek, 46-50 Benningfield Road	
Date of Excursion	Wednesday 13 th of June 2018	
Educational Purpose of Excursion	Comparing objects from the past with those of the present – WA Curriculum	
Supervisory Team	Amanda Allier, Kalli-Anne Austin, Sue Bolton	
Classes Attending	Wattle 3, 4 and 5	
Mode of Transport	Walking	
Times	Leaving School	9:30
	Arriving at school	Approximately 12:00
Cost per Student	\$5.00	
Payment to be made before	Monday 11 th of June 2018	
Requirements: eg Lunch, Uniform, etc)	School uniform, school hat and recess.	

Kind regards, Amanda Allier

Date: 25.5.2018

Retain the above section for your records.

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Return this section to school.

Home:	Work:	Mobile:
Other:		Class:

I am aware that any costs incurred as a result of accident or illness are my responsibility and that school staff are not responsible for any loss or damage to my child's personal property that may occur during the course of the excursion. I agree to inform the organisers before the scheduled excursion departure of any change to my child's health and fitness so that appropriate supervision may be arranged. I acknowledge that, should it be considered necessary, school staff will arrange to present my child for medical assessment.

I have read and understood the information regarding the _____ and give consent for my son/daughter _____ to attend.

Signature of parent/guardian: _____ **Date:** _____

❖ The following details have changed from those recorded on my child's medical information form.
