Local Area Activity Excursion Permission

To the Principal, I/We, Of address Hereby agree to our child. Currently in Year OR about to enter Year Taking part in activities / excursions involving walking to local areas from the school, these being journeys or activities no longer than one day, within walking distance. These activities are undertaken by students for educational purposes outside the school and authorised by the Principal and supervised by one or more staff members. Parents acknowledge that during these excursions the student will be subject to the control and direction of the staff member or members accompanying the excursion. Some examples of Local Area Excursions could be; walking to Read Park, Noosa Pirates and Touch fields for activities such as Cross Country and sports training or local area observations for curriculum purposes. In consideration of the school arranging and conducting such excursions, I/We further agree A. THAT the Principal either personally or by staff members or agents, may on my behalf obtain and authorise any medical and/or hospital treatment that is deemed advisable for the welfare of my child during the period of any excursion. B. THAT the senior staff member accompanying the party on any particular excursion may, if in his or her opinion circumstances require it, at any time during that excursion after contacting parents, arrange for my child's immediate return to home. Where parents are unable to be contacted I acknowledge that my child will return to the school. Students will be supervised at all times, except where alternate prior arrangements have been made by parents / guardians. Parent / Guardian Signed: Date:

