

## Alstonville High School **Excursion Information**

Excursion:

End of Year Lismore Activities Day

Venue:

Lismore Cinema followed by Lismore Swimming Pool

Date:

Tuesday 17th December

Transport:

Bus.

Approximate Times: We will be leaving school at 9.15am. Movie (either Addams Family or

Playing With Fire) at 10am. Swimming Pool from 12.30pm

Canteen:

A packed lunch is recommended. Canteen facilities will be available at the

loog

Cost:

\$20-00 per student (This cost covers entry to cinema, entry to pool, inflatable at

pool and bus)

Uniform:

**School uniform**. All students representing A.H.S. must travel in school uniform

Equipment:

Sun screen, full school uniform, lunch (or money for lunch)

Supervising Staff: Mr D.North and Ms K.Twyford are the organising teachers

Medical Insurance: Parents please note there is no personal injury insurance cover provided by the NSW Department of Education and Training for students in relation to school sporting activities, physical education lessons or any other school activity. Parents and caregivers are advised to assess the level and extent of their child's involvement in the sport program offered by the school, school sport zone, Regional and state school sport associations when deciding whether additional insurance cover, about that provided by Medicare, is required. Personal accident insurance cover is available through normal retail insurance outlets. The NSW Supplementary Sporting Injuries Benefits Scheme, funded by the NSW Government, covers any injury resulting in the permanent loss of a prescribed faculty or the use of some prescribed part of the body.







































Please return the Parent's Permission Note section and the \$20 to the front office by Monday 16th December

## LISMORE CINEMA AND SWIMMING POOL ACTIVITIES CONSENT FORM

(P	rease complete this form and return it to the Teacher in Cha	rge of your sport on the first day of sport)	
I he	ereby consent to my son/daughter/ward	(Full Name)	
Yr	participating in the Lismore Activities Day at the	Cinema and Swimming Pool in Lismore,	
In re	elation to the proposed water or swimming activities, I advise that	my child is: -	
	A non-swimmer		
	Can swim 10 metres		
	Can swim 20 metres		
	Can swim 50 metres		
	Can swim more than 50 metres		
	Permission to sw	<u>im</u>	
	I give permission for my child to participate in the water/swimming activities		
	I do not give permission for my child to participate in the water/swimming activities		
I adv	vise that my child requires the following flotation device to	assist him/her in the water:	
I und	dertake to provide this device so that my child can participa	ate in the activity.	
	he best of my knowledge, he/she has no medical condition, /her at risk in participating on this activity.	physical disability or injury, which puts	
MED	DICAL DETAILS My child is fully immunized YES /	' NO	
	Relevant Medical Information: (eg. Asthma, allergies e	tc.)	
	Medication(s) to be administered during the excursion. Incine instructions for administration, time of administration, and		
Sign	nature of Parent/Carer	Date:	
(Stu	udent)		