SACRED HEART COLLEGE



2 Cross Street, New Town Tasmania 7008 Email: admin@shc.tas.edu.au Website: www.shc.tas.edu.au Telephone (03) 6279 4090

Grade 1 Excursion Clare House Open Day

Monday, 14 September 2015

Dear Parents & Guardians,

On Wednesday 16th September, Grade One will be visiting Clare House in Clare Street, New Town to participate in their 100th anniversary celebrations. Students will be participating in a variety of games and activities as part of Clare House Open Day.

We will walk to Clare House as a group departing school at 12.45pm and returning at 2.20pm.

Supervising Staff:

Students will be supervised throughout the excursion by Ms Connie Abate, Ms Sarah Stephen, Mrs Tracey Apted and Mrs Liz de Groot.

Publication of Photographs, Videos, Audio:

We have been advised that there will be local media at the event. If you **do not** consent to the use of your child's image please let us know on the attached permission slip.

Lunch

Students will eat lunch before we leave school. There will be (free) sausage in bread available at the event. No lunch orders will be available on this day.

Informed Parent Consent:

The risks associated with any excursion are identified and assessed before the approval of any excursion, in line with the College's Excursion Policy. The SHC Excursion Policy and Procedures can be viewed on the SHC website at www.shc.tas.edu.au (under the *Policies* tab on the *Home* page).

<u>Parent Permission</u>: Please sign and return the attached permission slip to confirm your child's attendance. Please also complete the medical alert reminder if it applies to your child.

Permission

Grade One Excursion Clare House Open Day

Please return to class teacher by Tuesday 15th September 2015

Student Name:	
I have read all of the information provided by the school Clare House Open Day on Wednesday 16 th September 20:	
I give permission for my daughter/son	(full name) to attend.
I give my consent for my child to participate in all activitie	s arranged as part of this excursion.
I have provided the school with all relevant details relationand where relevant have updated this information.	ng to my child's medical or physical needs
Where the teacher-in-charge of the excursion is unable to contact me, I authorise the teacher-in-charge to:	contact me, or it is impracticable to
• Administer such first aid as the teacher-in-charge judg	ges to be reasonably necessary.
 Consent to my child receiving any medical or surgical a practitioner. 	attention deemed necessary by a medical
Medical Alert Reminder: (please complete if this applies to	o your child)
Child's Name: req	
(medication) to b	e taken on excursion in case of
(allergies, medical conditions etc.)	
Publication of Photographs, Videos, Audio:	
☐ I do not give my consent for images of my child to be	used in print, electronic or video media
$\hfill \square$ I give my consent for images of my child to be used in	print, electronic or video media
Parent Name:	
Signature:	
Contact No:	