



**PICTON HIGH SCHOOL
EXCURSION NOTE**

Faculty: SPORT Year: 2020 Name of excursion: Picton High School Swimming Carnival

Class Involved: Compulsory for ALL Students.

Date: Wednesday 12th February, 2020 (Week 3, Term1)

Venue: Wollondilly Leisure Centre Cost: \$5 Students/ \$2.50 Parent Spectators/Free for members

Transport: Walk. Supervised by staff.

Uniform required: Students to wear house colours or school sports uniform.

Organiser/teacher in charge: Picton High School PDHPE Faculty

Emergency contact number: Picton High School 02 46771242

Reason for excursion: Picton High School Swimming Carnival

Proposal approved by Head Teacher: Mr Walsh

Please return note to Student Sentral by: Before the end of Week 2 2020

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Permission Note

I give permission for Year.....

to attend the Picton High School Swimming Carnival in 2020.

I understand that the Department of Education does not cover the cost of medical expenses incurred as a result of an accident or injury to my child.

I understand that my child will be excluded from this excursion if they are on suspension.

I give permission to the school and DoE to publish names and photographs of my child: YES/ NO

I understand that house colours or full sports uniform is to be worn.

In case of emergency I may be contacted at this number:

Water or Swimming Activities

I advise that my child is a: strong swimmer (min.100m) average swimmer (min.50m)
(Please tick) non-swimmer poor swimmer (less than 50m)

I would prefer that my child **not** be involved in Water or Swimming Activities.

Parent/ Guardian Name :.....

Parent/Guardian Signature: **Date:**

Special needs of my child of which you may need to be aware (please provide full details).

Medication:

Special Dietary Requirements:

Asthma Epilepsy Other (please state)

Allergies: (please tick)

Sun Grass/Dust Pollen Insect Bites

Allergy to the following medication:

Other (please state):