



Canberra High School  
—ESTABLISHED 1938—

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ABN 16237342597



**YEAR 10 SOSE EXCURSION  
Australian War Memorial**

24 July 2018

Dear Parent/Guardian,

As part of the Year 10 History unit, 'Australia in the Modern World,' students will have the opportunity to visit the **Australian War Memorial** in Campbell and participate in interactive programs that explore Australians and the Second World War. The excursion will be on **Friday, 3 August**.

We only have capacity to offer this opportunity to **45/60?? students**. If your child would like to participate, the front office **MUST** receive payment and permission note by **Tuesday, 31 July 2018**. We recommend that students return their notes as soon as possible, as we will be unable to accept notes after the 55 places are full.

Excursion details are as follows:

**Dates:** Friday, 3 August  
**Time:** 9.15am – 1.00pm  
**Cost:** **\$15.00**  
**Transport:** Bus

All students attending will need to wear full school uniform. We will be back at school in time for lunch.

Students will attend their usual ACE class in the morning and then go straight to the AB to meet the teachers.

Year 10 History Team  
Owen Sharp, David Crowe-Beveridge, Spiro Adamopoulos

Teachers attending: Mr Beecher, Mr Crowe, Mr Adamopoulos, Mr Sharp

Conor Laenen  
SOSE Executive Teacher



# Permission form

I give permission for my child .....

to attend the excursion to Australian War Memorial on Friday 3 August

I have agreed:

- *authorisation for the teacher in charge to make arrangements for the welfare of the student (including medical or surgical treatment) in an emergency*
- *agreement to meet the costs associated with any emergency arrangement made by the teacher in charge - free ambulance transportation only applies in the ACT*
- *agreement that the student will be under the authority of the school for the duration of the excursion, and that the teacher in charge is authorised to return the student home at the expense of the parent/guardian if the teacher in charge considers that circumstances warrant such action*
- *disclosure of any information about current medical requirements and/or other needs of the child relevant to the excursion*

I have read the attached information regarding this excursion and understand what it contains.

Medical information (see above)

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.....

I have paid using the following method (circle):

**In Person**                      **Direct Debit**                      **QUICKWEB**                      **Credit Card**

Full name of parent/guardian (please print):

.....

Signature of parent/guardian: ..... Date: .....

**FEE CODE:       WAR MEM**

**EXCURSION TITLE: Australian War Memorial**

**PAYMENT OPTIONS**

1. **Payment in person** at school Front Office-between 8:15am & 2:30pm Mon-Fri  
EFTPOS facilities are available. Cheques made payable to Canberra High School

2.   **Direct Deposit:**    Bank: Westpac  
                              BSB: 032777        Acc. No.     001113  
                              Acc. Name: Canberra High School

**(If Paying by Direct Deposit please specify student name and/or excursion name as a Reference)**

3. **Canberra High School Website:**   [www.canberrahs.act.edu.au](http://www.canberrahs.act.edu.au)  
**(QUICKWEB)**

4.   **Phone Payments – Credit cards** Phone: 62057000 or 62057028

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**Please debit my**    **Mastercard**       **Visa**   

Card Number:            -     -     -

Card Expiry Date: \_\_\_\_\_ Name on card: \_\_\_\_\_

Parent/Carer: \_\_\_\_\_ Student Name: \_\_\_\_\_

Total Amount Paid: \$ \_\_\_\_\_

Cardholders Signature: \_\_\_\_\_

Contact Phone number of Cardholder: \_\_\_\_\_