

EXCURSION INFORMATION

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Name of Excursion:	<u>Date of Excursion:</u> Wednesday 4 th of September
North Side Athletics Carnival	2019
Venue:	<u>Times:</u> 8:30am – 3.00pm
AIS Track, Bruce	Please check the program for event times available
,	on the google class room (see bottom of this page)
Transport : Students are required to make their own	Accompanying Staff:
way to and from the venue.	Cameron Betts
·	Simon Beasley
Equipment Required:	Cost: \$10 per student.
 plenty of water 	All money needs to be paid to the front office by
 lunch (there will be a canteen open on the 	25/8/2019 to ensure registration in competition.
day)	
 School uniform or supplied school Athletics 	
singlet or you will not be allowed to compete.	
Athletics equipment (if owned)	

The accompanying staff member/s will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities.

Parents should be aware that staff members are not responsible for injuries or damage to property, which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should inform children of the risk to themselves, to others and property, of impulsive, wilful or disobedient behaviour. All students attending will be expected to give their full commitment to ensuring that the excursion is enjoyable, safe and successful for everyone concerned. We expect that the students behave responsibly at all times, and that any misconduct will be treated seriously and may require offending students to be sent home at the cost to the parents / guardians.

Parents are more than welcome to attend sporting events as spectators but may assist only when invited to by a school representative.

A Medical Information Form & Permission Note is enclosed. Please complete and return them to school as soon as possible.

The following are the recognised players' Code of Conduct that students should be aware of:

- Be a good sport.
- Play for enjoyment.
- · Work hard for your team as well as yourself.
- Treat all teammates and opponents, as YOU would like to be treated.
- Play by the rules.
- · Control your behaviour on and off the field.
- Learn to value honest effort, skilled performance and improvement.
- Cooperate with your coach, officials, teammates and opponents.
- Respect and abide by officials' decisions.

Samara Chisholm School Principal Graeme Lambert SHAPE Executive Teacher

For detailed information about the day please join the **2019 Northside and ACT Athletics Carnival** Google Classroom page via the following Class Code: **oydj5w** (Students only)

PERMISSION NOTE and MEDICAL INFORMATION

Please return this sheet, filled out front and back and with appropriate signatures as soon as possible

I give permission	on for my child / v	vard				
	n the North Side A 4 4 th of Septembe		ck, Bruce			
I have read the	attached informa	ation regarding t	his excursion an	d understand wh	at it contains.	
Full name of P	arent/Guardian	(please print)				
Signature of P	arent/Guardian			C)ate	
	rns the teacher			•		
Contact Name	and Number fo	r the day in cas	se of an emerge	ency:		
while on the excatch up on the	ree to represent ccursion, I will be work I will miss	the school, my absent from the due to being on	peers and self in e following classe this excursion.		nner. that I will need to	
All boxes MUS void your position	• • •	our teacher) be	fore you will be a	allowed to attend	. Failure to do so	will _
Excursion details	Period 1 Subject:	Period 2 Subject:	Period 3 Subject:	Period 4 Subject:	Period 5 Subject:	
Northside Athletics Wednesday 4/9/2019 Week 7						
Full name of s	tudent (please p	rint)				
Signature of S	tudent				. Date	

FEE CODE: NSIDEATH

EXCURSION TITLE: North Side Athletics Carnival

	PA	YMENT OPTION	NS				
1.Payment in person a EFTPOS faci				§ 2:30pm Mon-Fri able to Canberra High School Output Description: Begin to the content of			
2.Direct Deposit:		Westpac 032777 Acc Canberra High					
3.Canberra High School Website: www.canberrahs.act.edu.au (QUICKWEB)							
4.Phone Payments - Credit cards Phone: 6142 0800 or 6142 0807							
Please debit my Mas	stercard	Visa 🗌					
Card Number:	100-00	100-00		1-000			
Card Expiry Date:	Name on c	ard:					
Parent/Carer:	St	udent Name:					
Total Amount Paid: \$							
Cardholders Signature:							
Contact Phone number of	Cardholder:						

NB: For direct deposits please ensure you specify the student name and excursion name as a reference

Refund Policy: If a student and/or parent has made a financial commitment to an excursion and if the student is unable to attend for any reason (except in the case of sudden illness), the student and/or parent is entitled to a refund of money paid minus any non-refundable financial outlay that the school has made on behalf of that student. The school will endeavour to find a replacement for that student, in which case, all money will be refunded. The usual appeal provisions apply.