



Canberra High School
— ESTABLISHED 1938 —

27/8/2019

Dear Parents/Carers,

Each year Canberra High School students enter the National Botanic Gardens Photography Competition. The competition is open to all students at ACT schools and colleges. We have had great success in previous years and hope to do well again in 2019. All student works submitted are exhibited and winning entries receive a certificate and prize money. Photography students this semester are invited to attend an excursion to the gardens with the purpose of producing photography for this competition. The excursion will be held on Friday 6 September. This excursion provides an excellent opportunity for students to demonstrate their photography skills and to have their work exhibited to the public.

Students will leave school at 11.00am and travel by bus to the Gardens. Students will spend approximately two hours photographing within the gardens. Students will arrive back at school by the same travel by 1.30pm.

The excursion will cost \$14.00 per student for the bus return fare. The cost also includes the production of two glossy photographic prints for entry into the competition. Students can enter up to four images in the competition and additional materials to print more entries can be purchased through the school front office for \$4 per A4 print or \$3 per 20x25cm print. The \$14.00 cost must be paid to the front office, no later than 8.40am Wednesday 4 September.

Please sign the permission note on the reverse side, return it to Mr Kay in the Arts staffroom (224) and pay \$14 at the front office.

Students must be in the correct school uniform, and will need to bring their own recess and lunch. Staff accompanying students on excursions 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 warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

Parents and/or guardians must supply emergency contacts in the event of a critical incident.

Yours sincerely,

Andrew Kay
Photography Teacher

Phone 02 6142 0800 • Fax 02 6142 0806

Address Bindubi Street Macquarie ACT 2614

Email info@canberraahs.act.edu.au • Web www.canberraahs.act.edu.au

ABN 16 237 342 597



Excursion Permission form

I give permission for my child _____

to attend the excursion to the National Botanic Gardens
on Friday 6 September 2019 from 11.00 am until 1.30pm.

I have agreed:

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

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

Medical information (see above)

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Full name of parent/guardian (please print):

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Emergency contact phone number:.....

Signature of parent/guardian:

Date:

FEE CODE: BOTANIC

EXCURSION TITLE: Botanic Gardens

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

3. Canberra High School Website: www.canberraahs.act.edu.au
(QUICKWEB)

4. Phone Payments – Credit cards Phone: 61420800 or 61420807

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: _____

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.