

Permission Notification Report

Bike Ed Ride 4N, 5S/Y, 6A

Dates: from 25/06/2018 to 29/06/2018

Details of excursion: As part of the Bike Ed program students will be given the opportunity to put the skills they have learnt over the term into practice out in the community. This ride will be fully supervised by Mr Carey, Mr Shaw and the home group teachers. The ride will take place during each home groups allocated Bike Ed time and will use the paths around CEPS. This permission form is to be returned to school by 4pm FRIDAY 22ND JUNE.

Destination: Paths around CEPS

Special needs: Students will need their asthma puffers, helmets, hats and bikes where possible.
Monday 25th June 4N 9:00am to 10:00am, Tuesday 26th June 5Y 9:00am to 10:00am, Wednesday 27th June 5S 10:00am to 11:00am, Friday 29th June 6A 11:30am to 12:30pm.

Transport method: Bicycle

Adult responsible: Mr Dale CAREY

Cost: \$0.00

Student details:

Tear off slip

Please check details on this slip, sign and return to the school no later than the 22/06/2018.

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Cost: \$0.00

Use CSEF Funds

Medical condition/s: None

Access Alerts: No

Home telephone:

Home mobile:

Emergency contact number for this excursion:

Doctor name:

Doctor telephone:

Medicare number:

Family has ambulance subscription:

I consent to my child taking part in this excursion and where the teacher in charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher in charge to:

- consent to my child receiving such medical or surgical attention as may be deemed necessary by medical practitioner,
- administer such first-aid as the teacher in charge may judge to be reasonably necessary.

Signature of parent/guardian: _____

Date: _____

The Department of Education and Training requires this consent to be signed for all students attending school excursions.

NOTE: Parents/guardians should provide written approval prior to their child taking part in any excursion.