End of Year Rewards Excursion

EXCURSION PERMISSION LETTER

Dear Parent / Guardian,

This excursion has been organised as a reward to Year 9 and 10 students who have been consistently positive members of our school and community. A breakfast sausage sizzle will start at 9am followed by a coach to spend the rest of the day at Luna Park. Students who have been placed on an afternoon detention, placed in the Reflection Room or placed on a Level 3 or 4 monitoring book must apply to the Deputy in writing before the 4th of November in order to be considered eligible to attend the excursion.

EXCURSION: Year 9 and 10 Reward Day – Luna Park

DESTINATION/VENUE: Luna Park - 1 Olympic Dr, Milsons Point NSW 2061

DATE: Friday 11th December 2015 TIMES: All day

MEETING POINT: Rose Bay Secondary College TIME: 9.00am

DISMISSAL POINT: Rose Bay Secondary College TIME: 4.00pm

TRANSPORTATION TO VENUE AND FROM VENUE: Coach

COST: $45 PAID TO FINANCE OFFICE BEFORE: Friday 20th November 2015

WHAT TO BRING: Full school uniform and lunch or money to buy food.

Please return the signed permission note to: B Block Staffroom for year 9
A Block staffroom for year 10

Pay either online or through the Finance Office by Friday November 20th 2015

Please note personal technology is solely the responsibility of the student.

Ms Jansen Ms Buckley Ms Andre
Year 10 Advisor Year 9 Advisor Deputy Principal

Please complete the Permission Slip on the next page and return to school by the required date.
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EXCURSION: Year 9 and 10 Rewards Day – Luna Park

DESTINATION/VENUE: Luna Park - 1 Olympic Dr, Milsons Point NSW 2061

DATE: Friday 11th December 2015

MEETING POINT: Rose Bay Secondary College

DISMISSAL POINT: Rose Bay Secondary College

TRANSPORTATION TO VENUE AND FROM VENUE: Coach

Please tick the location you wish to be dismissed from: □ Bondi Junction

□ Rose Bay Secondary College

COST: $45

PAID TO FINANCE OFFICE BEFORE: Friday 20th November 2015

WHAT TO BRING: Full school uniform and lunch or money to buy food from the venue.

ADDITIONAL INFORMATION:

Any allergies or Medical conditions: _____________________________________________

Detail alternative travel arrangements: ____________________________________________

AUTHORITY TO PUBLISH (please tick)

I give permission for my child’s work/image to be used in RBSC’s education materials and website. □

I give permission for my child’s first name to be used in RBSC’s education materials and website. □

I GIVE PERMISSION FOR MY CHILD _________________________________________ TO ATTEND THE

EXCURSION DETAILED ABOVE.

_________________________________________  ____________________________________

Parent’s name  Signature

_________________________________________  _______________________________

Date  Contact Phone number