



2nd February, 2016

LOCAL WALKING EXCURSION AND SPORT PERMISSION NOTICE 2016 - Grades 5/6

Dear Parents/Guardians,

PERMISSION TO ATTEND LOCAL WALKING EXCURSIONS

During the year, the children at Westgarth will be going on various walks in the local community e.g. Northcote Library, Post Office, Johnson Park, Athletics at Collingwood Harriers, etc.

It is expected that your child will take part in these excursions but permission is required for your child to attend. Please find below the permission form that parents are required to sign for Walking Excursions and Interschool Sport.

PERMISSION TO ATTEND INTERSCHOOL SPORT

During 2016, Westgarth Primary School Grade 5-6 students will be involved in Interschool Sport. The summer sports program will commence in February and will include games such as softball, rounders, cricket and bat tennis. The Winter sports program will include games such as football, soccer, newcombe and netball. Now that your child is in Grade 5/6, it is possible that they will be selected in one of the school teams. It is more convenient for everyone involved if parents sign a one off sports permission and walking notice. By signing this form you are giving permission for your child to participate in a local walking excursion, participate in an interschool sports team/sports clinic and travel by bus to reach the venue, for the duration of Grades 5-6.

Parents please ensure that the appropriate clothing, hats, footwear and sunscreen are worn.

Could you please read carefully the notice below and return it to school, signed, as soon as possible, to the class teacher.

Thank you,

Jo Wheeler

Jo Wheeler
Principal

Grade 5/6 Local Walking Excursion/Interschool Sport Permission

I give permission for my child Grade
to participate in local walking excursions, to travel by bus to sporting venues as a member of the Westgarth Primary Interschool Sport Team during Grades 5-6.

In case of accident or sudden illness during the excursion, I authorise the teacher in charge to consent, where it is impracticable to communicate with me, to the child receiving such medical or surgical treatment as may be deemed necessary.

Signature of Parent/Guardian Date

Parent/Guardian phone number