



MENAI HIGH SCHOOL

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**Principal
B Ellevsen**

**Deputy Principal
R Allen**

**Deputy Principal
E Sayed-Rich**

**Deputy Principal
L Meagher**

13th March, 2019

Dear Parents/Caregivers,

As a reward for students who continue to work well at school, the Welfare Team has provided the opportunity for selected students to participate in an excursion to the Easter Show on Friday 12th April, 2019.

This excursion is available to students from Years 7-9 who have received a Principals Award in 2018 and for those in Year 7 who have received a student adviser's award (ie 6 praise certificates).

The cost of the bus will be subsidised by the school. As a result the cost per student including entry will be \$22 payable to the office by Tuesday 2nd April, 2019. The cost of rides, showbags etc will be borne by the students.

The bus will be leaving the school at 8.30am on Friday 12th April, 2019 and returns to school at 3.15pm and can carry a maximum of 50 students. Students are able to wear mufti.

Because of the nature of this excursion, students are able to explore the Easter Show without direct teacher supervision for periods of 90 minutes. Students are required to physically check in with the teacher at 90 minute intervals throughout the day. They must be in a group of at least 2 and will have mobile phone contact with the teacher.

Students will be assembled at 2.00pm for roll call. Students must adhere strictly to this time. Please return the slip below with your payment to the office by Tuesday 2nd April, 2019.

We trust that parents will support the day as these students have certainly earned the privilege.

Yours sincerely,

**B STONE
Head Teacher, Welfare**

**B ELLEVSEN
Principal**

My child _____ of Class _____ has permission to attend the Easter Show Excursion and is allowed to explore the Easter Show without direct teacher supervision for periods of up to 90 minutes.

Signature:
Parent/Caregiver

Menai High School



Medical Information

(Confidential - Available only to the Teacher-in-Charge)

Student's Name:

Organising Teacher: **B Stone**

Excursion: **Reward Excursion - Easter Show**

Date: **Friday 12th April, 2019**

Home Address:

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Date of Birth: Telephone:

Emergency Contact Numbers

Father's Business No: Mother's Business No:

Other contacts: Name: Phone:

Name: Phone:

Name of Student's Doctor: Doctor's Phone No.....

Medical Condition (including anaphylaxis and allergies):

Physical disabilities:

Special foods:

Medication being taken:

Special treatment needed in an emergency:

Emergency medication NOT to be given: (e.g. Penicillin)

Activities to be avoided by this student:

Any other relevant information:

.....

Water or Swimming Activities (Please tick)

In relation to the proposed water or swimming activities: I give permission/I do not give permission for my child to participate in water/swimming activities. I advise that my child is a:

- Strong Swimmer
- Average swimmer
- Poor swimmer
- Non-swimmer