



YOUNG HIGH SCHOOL

Campbell Street
(Locked Bag 8008)
Young NSW 2594
Phone: 02 6382 1166
ABN: 18 246 198 266

EXCURSION: Cycling Tour (Yrs 7-11)

DATE: Wed 06/12/23

COST: \$7 (+ \$3 to attend YAC if not a season ticket holder)

ORGANISER: Max Hofman

GROUP/CLASS ATTENDING: (Yrs 7-11)

VENUE: Young / Chinamans Dam / Aquatic centre / Skate Park.

DEPART TIME: 9:30

RETURN TIME: 3:14

NOTES AND MONEY TO BE RETURNED BY: 04/12

FACULTY: Industrial Arts

No OF STUDENTS: 50 / 60

Educational value of excursion: These may include but not be limited to teamwork, resilience, and confidence-building through the challenge, problem-solving, connecting with nature, and coordination, and strength.

Transport: Bike.

Uniform: Appropriate clothing for riding and Swimming gear for a swim at the Young Aquatic Centre. A bag with your child's swimming gear can be locked up in a classroom at school to be collected in the afternoon before walking down to the local pool.

Other information: Students will need to bring their own road-ready bike with functioning brakes and a helmet, water bottle, sunscreen, swimming clothes and a towel in a separate backpack, snacks for morning and afternoon tea & a BBQ Lunch will be provided (sausage sizzle and poppers).

SUPERVISING STAFF: Mr. M Hofman, Mr J Cronin, Mr N Miller, Mr C Tonpi, Mr M Manea

CONTACT PHONE NUMBER: 63821166 (school)

ORGANISING TEACHER:

PRINCIPAL:

Students who miss a paid excursion will NOT be refunded any moneys paid without the approval of the Principal.

Please keep this page for your own reference.

Please return the next page with payment to front office.

PARENTAL/GUARDIAN GENERAL CONSENT FORM

REACH FOR THE STARS

Growth Resilience Empathy Acceptance Teamwork

Excursion Itinerary

Name of Excursion	End of Year '23 Cycling Event
Date(s) of Excursion	06/12/2023
Destination	YHS / Chinamans Dam / YAC / Skate Park
Day (1,2 etc)	1

Time	Activity and Location
8:50	Bike Test / Briefing
9:30	Leave YHS Caple st. to Chinamans Dam (Mud run / Jacksons RD / Stars Bridge via train line route.
12:30	Lunch @ Chinamans Dam
1:30	Cycle back to town via Skate Park / Gully / Showground
2:30 – 3:00	Arrive @ YAC
3:00 – 3:14	Students finish @ YAC / Return to YHS

REACH FOR THE STARS

Growth Resilience Empathy Acceptance Teamwork

EXCURSION TO:

I hereby give my consent for: _____ of year _____

to participate in excursion to: Chinamans Dam on 06/12/23

I give permission for my child to receive medical treatment in case of emergency.

Medicare Number: _____

My child has the following special needs:

_____ (Please attach further details)

EMERGENCY CONTACT PHONE No. (work) _____ (home/mobile) _____

PARENT/GUARDIAN SIGNATURE: _____ Date: _____

- An additional consent is required for excursions involving water activities, overnight stays, and travel by air or private car.
- Payment may be made at the front office between 8:30 and 8:55am, at Recess or Lunch or vis the school website.
- For all excursions the signed consent form and the required payment (deposit or full cost) must be taken to the Front Office.
- Students who miss a paid excursion will NOT be refunded any moneys paid without the approval of the Principal.

PAYMENT INFORMATION

I enclose cash / cheque in the amount of \$ 7

I have made an online payment as detailed below.

Please access payment from my child's scholarship funds.

DESCRIPTION REFERENCE (to be entered when making online payment)

Online Receipt Number: _____

Amount: \$ _____ Date Paid: _____

REACH FOR THE STARS

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ADDITIONAL PARENTAL/GUARDIAN EXCURSION CONSENT FORM

WATER / SWIMMING ADVICE FORM

Excursion to Chinamans Dam / YAC

From: 06 / 12 / 23 To: 06 / 12 / 23

Student name:	Parent/Carer name:
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This excursion will involve the following swimming / water activities:

Activity	Date	Place
Water Activities @ YAC	06/12/23	YAC

Students may choose not to swim, however it is important for organisers to know a student's swimming ability in case of emergencies or accidents.

Declarations by parent/carers

1. In relation to the proposed swimming activities, I advise that my child is a:

(Tick one box and leave all others blank)

- ☐ **Non swimmer** – my child is unable to swim.
- ☐ **Weak swimmer** – my child is not a confident swimmer or is not comfortable in the water.
- ☐ **Average swimmer** – my child is a reasonable swimmer but is not very strong or confident in deep or fast water.
- ☐ **Strong swimmer** – my child is a strong swimmer and is very confident in deep or fast water.

2. In relation to the proposed swimming activities, I advise that:

(For each line, tick one box and leave the other blank)

- a. My child is able to tread water ☐ YES ☐ NO
- b. My child is able to float on water ☐ YES ☐ NO

I understand students may have to undertake a swimming proficiency test.

3. I have completed the above information regarding swimming activities and

(Tick one box and leave the other blank)

- ☐ I consent to my child participating in the swimming activities
- ☐ I **do not** consent to my child participating in the swimming activities.

Parent/carers name: _____

Parent/carers signature: _____ Date: _____

REACH FOR THE STARS

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