



## YOUNG HIGH SCHOOL

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

**EXCURSION:** Meals on Wheels Service

**VENUE:** S&C Club

**DATE:** 5/12/23

**DEPART TIME:** 11am

**RETURN TIME:** 3pm

**COST:** N/A

**NOTES TO BE RETURNED BY:** 30/11/23

**ORGANISER:** C.Brown

**FACULTY:** Home Economics

**GROUP/CLASS ATTENDING:** Yr 8 - 11

**No OF STUDENTS:** 25 - 30

**Educational value of excursion:** Students will develop a sense of Community and will demonstrate service skills for the Elderly community members. This will allow them to work as a team in a realistic service environment. This helps develop empathy and resilience towards their local community members.

**Transport:** Walking

**Uniform:** Black Skirt or pants, white shirt, covered shoes.

**Other information:** Minimal jewellery to be worn, Christmas decoration allowed.

**SUPERVISING STAFF:** C.Brown and G.Smithers

**CONTACT PHONE NUMBER:** 63821166 (school)

**ORGANISING TEACHER:** C. Brown

**PRINCIPAL:** A. Baker

Please keep this page for your own reference.  
Please return the next page with payment to front office.

## REACH FOR THE STARS

### Growth Resilience Empathy Acceptance Teamwork

**PARENTAL/GUARDIAN GENERAL CONSENT FORM**

**EXCURSION TO:** *Meals on wheels Service*

I hereby give my consent for: \_\_\_\_\_ of year \_\_\_\_\_

to participate in excursion to: S&C Club on 5/12/23.

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 \$ *NIL*

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: \_\_\_\_\_

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