|  |  |  |  |
| --- | --- | --- | --- |
| School name |  | | |
| Excursion date |  | Excursion location |  |
| Stage |  | No. of students |  |
| Cost per student |  | Total cost |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Contact name |  | | |
| Salutation | Mr  Mrs  Ms  Miss  Dr  Other: | | |
| Email address |  | | |
| School postal address |  | | |
| Contact telephone |  | Mobile |  |
| After hours telephone |  | Fax |  |
| Curriculum/study area |  | | |
| No. of teachers attending |  | No. of parents attending |  |
| Teachers names |  | | |
| Arrival time |  | Departure time |  |

|  |  |
| --- | --- |
| All teachers participating have read and understood the safety information and requirements and the risk assessment. | Yes |
| I understand that the excursion may have to be post-poned in wet or windy weather. | Yes |
| I understand that the excursion has teacher-guided elements and I will be provided with resources to facilitate these elements of the excursion. | Yes |

Are there any students with special needs which may need consideration before the excursion?

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How did you hear about us?

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| --- | --- | --- | --- |
| Signature of organising teacher |  | Date |  |
| Signature of school principal |  | Date |  |

Are there any further questions?

|  |
| --- |
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|  |  |  |  |
| --- | --- | --- | --- |
| Office use only |  | | |
| Excursion date confirmed |  | Staff allocated: | |
| Student safety talk given |  | Notes: |  |
| Invoice requested from FOBS |  |  |  |