Epping West Public School Creative Successful Learners

Local Area Excursion Permission

I consent for my son/daughter	
(Child's	First name/Preferred name + Surname
to walk to and from places/venues wi Public School.	thin a 30 minute walk of Epping West
This permission note will cover your c Epping West Public School from Kinde	child for the whole of their schooling at ergarten - Year 6.
My child's date of birth is	
(Day/N	Ionth/Year)
An example of these events or occasi	ons could include:
	Epping West Park, Green Patch play area Pre-school), Local Excursion History Walk tion Drill or Evacuation Event).
All these events will be fully supervise School.	ed by staff from Epping West Public
A separate form needs to be complete	ed for each child.
Please return the signed form to your	child's class teacher as soon as possible.
	Signed
(Parent/Guardian Name)	(Parent/Guardian Signature)
Date	
T:\Office\Forms\Local Area Excursion.docx	