




Dear Parent / Carer / Guardian,

I am pleased to provide you with the following details regarding our upcoming incursion.

<b>Incursion name:</b>	Hospital Familiarisation Program
<b>Class/Year groups attending:</b>	Pre-primary students only - PP1 and PP2
<b>Organising Teacher:</b>	Mrs Fiona Hammill & Miss Sharna Sibson
<b>Incursion Date:</b>	Monday 18 March 2024
<b>Incursion cost:</b>	\$6.00 per child
<b>Activities:</b>	 <p>To support students understanding of what might happen when visiting a hospital, they will be participating in a range of activities:</p> <ul style="list-style-type: none"> <li>• Interactive mat talk - the presenter has a wide range of medical equipment to demonstrate on our life-sized doll.</li> <li>• “Let’s Play Hospitals” DVD.</li> <li>• Role-Play with dress-ups and medical equipment, playsets, puzzles, dolls, and books.</li> </ul>
<p><b>Please complete, sign, and return the section below to the school with payment.          By Thursday 14 March 2024</b></p>	



## PARENT/GUARDIAN/CARER INCURSION CONSENT FORM

**PAYMENT CAN BE MADE DIRECTLY TO THE SCHOOL’S BANK ACCOUNT**  
**COMMONWEALTH BANK | BSB: 066-040 | ACCOUNT: 1990 6029 | REFERENCE: Surname & TA**

I consent to (your child’s name): \_\_\_\_\_ of TA: \_\_\_\_\_  
 participating in the **Hospital Familiarisation Program incursion on Monday 18 March 2024.**

- I have paid **\$6.00** to the school by Direct Deposit.      RECEIPT N<sup>o</sup>: \_\_\_\_\_
- I have paid **\$6.00** via QKR.
- Pre-payment has already been made to the school (if credit on student account).

**Student health considerations:** If your child’s medical condition has changed or your child has special needs, please provide full details, and include any relevant medical details below:

\_\_\_\_\_

\_\_\_\_\_

**Parent/Carer/Guardian consent:** I give permission for my child to receive medical treatment in case of emergency. I am aware that the school and its employees are not responsible for personal injuries or property damage that may occur on an incursion unless the school or its employees are proven to be negligent.

**Emergency Contact Name:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_