

Seven Hills West Public School

Respectful, Safe, Responsible Learners

Medical and Dietary Requirements Form

Stage 3 Canberra Excursion

Dear Parents and Caregivers,

Stage 3 teachers are very excited that your child is attending our three-day overnight excursion to Canberra from Wednesday 28th August to Friday 30th August, 2019.

This note requests you to inform the school of any medical and/or dietary requirements your child may have to ensure they have an optimal experience during their excursion.

It is important to have this form completed and returned to school before Friday 28th June 2019.

Next term, a note will be sent home with more information, such as clothing to pack, to prepare your child for their excursion in Term 3.

Ms K Becker Principal 14.06.19 Mrs P Jade-Pierce Assistant Principal



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Stage 3 Canberra Excursion

PLEASE WRITE IN PRINT

Form to be completed and returned to school before Friday 28th June, 2019

| Student's full name: | | procedure recurried | to sensor serore rina | y 20 Julie, 2013 |
|--|-------------------------------------|---------------------|-----------------------|------------------|
| Date of birth: | | | | |
| Medicare number inc. expiry date: | | | | |
| Private health fund: | | | | |
| Emergency contact details: | Name: Relationship: Contact number: | | | |
| Medical condition: | | | | |
| Health Care Plan Y N | (If indicating Y- please specify) | | | |
| (Please circle) | | T | | |
| Medication to be administered | Name: | Name: | Name: | |
| Y N | Dosage: | Dosage: | Dosage: | |
| (please circle) | | | | |
| Dietary requirements: (Please circle) | Vegetarian | Vegan | Dairy-Free | Halal |
| Food allergies Y N (Please circle) | (If indicating Y- please specify) | | | |

Cnr Lucas Road and Sackville Street Seven Hills NSW 2147
Telephone: 9622 2136 Facsimile: 9831 6437 Email: sevenhillw-p.school@det.nsw.edu.au

