## EXCURSION PERMISSION FORM Week 1

### Service Name
- **St Patricks OSHC**

### Suburb
- **Beenleigh**

### EXCURSION 1

<table>
<thead>
<tr>
<th>Venue</th>
<th>St Patricks OSHC Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Tobruk St Beenleigh</td>
</tr>
</tbody>
</table>

### Venue Details
- **Description of destination**: Service based
- **Activities at venue**: We will have the excitement and experience of decorating our very own ceramic Christmas train for the Christmas table. Paints/ Glitter ect provided. Complete cost for the day $52

### Staffing
- **Staff Ratio**: 1-15
- **Anticipated number of children**: Max 30
- **Anticipated number of staff**: 2

### Transport Details
- **Departure Time (approx)**: N/A
- **Return Time (approx)**: N/A

### Staffing
- **Staff Ratio**: 1-15
- **Anticipated number of children**: Max 30
- **Anticipated number of staff**: 2

### Seat Belts
- Yes

A risk assessment of this excursion has been conducted.

### PERMISSION EXCURSION 1

I ______________________________ hereby give permission for my child/children to attend the above excursion and activities organised by the above named service. Phone number for contact on this day is __________________________

Parent/Carer Signature __________________________

Date __________________________

### EXCURSION 2

<table>
<thead>
<tr>
<th>Venue</th>
<th>St Patricks OSHC</th>
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<tbody>
<tr>
<td>Address</td>
<td>Tobruk St, Beenleigh QLD 4207</td>
</tr>
</tbody>
</table>

### Venue Details
- **Description of destination**: Service based
- **Activities at venue**: Rotation creations will be providing a colourful experience for the children. They will create their very own IPAD case or Pencil case with some very groovy colours. Cost for the complete day $57

### Staffing
- **Staff Ratio**: 1-15
- **Anticipated number of children**: Max 30
- **Anticipated number of staff**: 2

### Transport Details
- **Departure Time (approx)**: N/A
- **Return Time (approx)**: N/A

### Staffing
- **Staff Ratio**: 1-15
- **Anticipated number of children**: Max 30
- **Anticipated number of staff**: 2

### Seat Belts
- Yes

A risk assessment of this excursion has been conducted.

### PERMISSION EXCURSION 2

I ______________________________ hereby give permission for my child/children to attend the above excursion and activities organised by the above named service. Phone number for contact on this day __________________________

Parent/Carer Signature __________________________

Date __________________________