

## **Excursion/Permission Form**

Camp/Excursion/Activity Details				
Venue				
Date of Camp/Excur	sion/Activity			
Student Details				
Name				
Class			Date of Birth	
Parent/Guardian Details				
Name				
Phone Number			Mobile Number	
Emergency Contacts: (Other than Parents)				
Name				
Phone Number			Mobile Number	
Parental Consent:				
I certify that I have read and agree with the information provided by the school in relation to the				
planned activity, including any attached material and give permission for my son/daughter to attend.				
Signature of Parent/Guardian: Date: Date:				

**Greenfields Academy** 

07 5414 2372 enquiries@greenfieldacademy.com 141 School Street, Greenfield, QLD, 4556