



Doreen Primary School
Permission Note

For _____ on _____
(Name of Excursion/Activity) (Date of Excursion/Activity)

Family Name _____

I understand my child/ren _____
will be attending the abovementioned excursion/activity.

Where transport is required I understand that my child may be travelling by bus or by private car.

I give permission, where it is impracticable to contact me, to the teacher in charge consenting to any medical treatment as may be deemed necessary.

Comments/Special instructions _____

Signed _____

Date _____ Contact Phone No. _____

Amount Enclosed \$ _____

** Full uniform should be worn to all excursions along with any other clothing Required for the day.**