

Coleambally Central School

A quality education in your community school

Find us at: Kingfisher Avenue, Coleambally, NSW, 2707 Phone: 026954 4131 Fax: 026954 4396 Email: coleamball-c.school@det.nsw.edu.au



GENERAL PERMISSION NOTE 2024

Dear Parents/Carers.

The General Permission Note is designed to streamline our permission note system. Separate permission notes, together with full details, will be issued for any excursion outside the immediate township of Coleambally which involves travel by bus or private vehicle.

Please tick the below boxes to indicate your consent, which will remain current for the duration of your child's learning at Coleambally Central School. Please contact the office asap if there are any changes throughout the year.

STUD	ENT NAME:	YEAR:	
Please	tick boxes below:		
	give permission for my child to travel to various venues within the township of Coleambally under school supervision including walking or bus travel.		
	I give permission for my child to be photographed or filme competitions, and sporting events for media publication in Facebook.	otographed or filmed within the classroom, local businesses, nedia publication including Coleambally Central School	
	I give permission for my child to watch G rated movies that have the approval of the Principal. If you child's class needs to watch a PG (Primary) or M (Secondary) rated movie as part of their curriculum, a separate permission note will be sent home by the teacher.		
	I give permission for my child to participate in Wellbeing, Lessons. These lessons have been developed by the D important priority for schools.	e permission for my child to participate in Wellbeing, Child Protection and Drug Education ons. These lessons have been developed by the Department of Education and they are an rtant priority for schools.	
	I give permission for medical assistance to be sought on my behalf, in the event of illness or injury to my child.		
	I understand if my child damages their issued YONDR p	ouch, this will incur a \$20 replacement fee.	
Parent	/Carer Name:	Date:	
Parent	/Carer Signature:		
1	£080		

Mr Micheal Burke PRINCIPAL