



Excursion destination  
*Details of venue/location*

Date(s) of excursion  
*If multiple dates list all or indicate pattern. i.e 1st Monday each term/during vacation care.*

Purpose for excursion and details of Activities to be undertaken during excursion

Details of Departure and Arrival Times

Estimated departure time and arrival at destination

AM   AM   
 PM   PM

Estimated departure time and return to Service

AM   AM   
 PM   PM

Method of transport  
*List transport to and from venue*

Details of adults accompanying the children

Full Name	Position/Role	Qualification	Blue Card	First Aid
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total number of children

Total number of adults

Details of the children participating  
*(group name is sufficient; 'Unit 1' or ASC as per Roll)*

A Hazard and Risk management has been prepared and is available at the service.  
The form number of WHS.012 Hazard & Risk Form completed is:

Parent/Guardian to complete

I do  I do not  give permission for my child

to attend the excursion as outlined above. I have been provided with full details of the excursion including date, time, destination, estimated travel time, activities to be undertaken and method of transport **prior** to the excursion occurring.

Parent/Guardian Name & Signature  Date