

Generic Excursion Permission Form
Omeo Primary School

I give permission for my child/ren (names)
to attend (name of excursion/ destination)
Date of excursion:
Travelling by:

I grant permission for medical care to be given if the teacher in charge is not able to contact me or our emergency contacts.

Emergency contacts are:

Name: Phone No:

Name: Phone No:

My Name: Phone No: Date:

*This form should be handed/ emailed to the office no later than 8.30 on the day of the excursion.
If emailed please inform the teacher/ office so it can be printed.*