

7th March 2017



**NORWOOD
MORIALTA**
HIGH SCHOOL

Dear Parent/Caregiver

**Re: Year 8 Drama Excursion 'Scorch' by Stacey Gregg
Friday 17th March 10am - 12:45pm**

As part of the Year 8 General Arts course it is expected that all students attend a live theatrical performance for the purpose of review writing. The Year 8 Drama students have been booked in to see a Prime Cut Productions performance of '**Scorch**'.

"Scorch confronts ideological norms which have for so long shaped society's understanding and beliefs. Actor Amy McAllister portrays a troubled teenage girl who is struggling to find herself and her identity and who's new and first ever relationship leads to devastating effects both legally and personally."

<http://www.holdenstreettheatres.com/index.php/adelaide-fringe/scorch>

MIDDLE CAMPUS

Morialta Road West
Rostrevor SA 5073
TEL: +618 8365 0455

SENIOR CAMPUS

505 The Parade
Magill SA 5072
TEL: +618 8364 2299

PO Box 180,
Magill SA 5072

dl.0787.info
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www.nmhs.sa.edu.au

**ENRICHING
HUMANITY**

Arrangements:

- **Date: Friday 17 March 2017**
- **Cost: \$23.50**
- Students will **meet in the lower Courtyard, outside the canteen on at 10am (Lesson 3)**
- We will depart school via a private bus to Holden Street Theatre, Thebarton
- The performance begins at 11 am
- The play is expected to run for one hour and students will return **to school at 12:45pm**
- Students will stay with their Drama teacher to reflect on the performance before being dismissed for lunch
- Students will be accompanied by staff members Mr Nicola Primaro and Mr Daniel Del Pilar
- Lesson 7 and 8 will continue as normal
- Students are expected to wear the **correct school uniform** and should bring note taking materials

Review Writing is an assessable component of the Year 8 Drama course and as such, students are expected to attend. Tickets are pre-purchased prior to the performance and it is expected that all students will attend. Additionally, we have tried to allow as much time as possible so that arrangements can be made to ensure your child's attendance. Therefore, once payment is made, without legitimate reasons with sufficient notice and documentation (such as a sick certificate), the cost will not be refunded if your child is not present.

Please return the attached consent form along with payment to the Middle Campus Pay Station no later than Thursday 16th March.

Yours sincerely

Linda Below
Arts Coordinator

Jacqui van Ruiten
Principal

Attach



CONSENT FORM FOR EXCURSION

(Both sides of this form must be completed and returned to the teacher in charge of the excursion)

*Please use block letters when filling out this form

As a parent/caregiver of:

STUDENT'S NAME		PLG	
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I:

PARENT/GUARDIAN NAME	
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give my consent for him/her to participate in:

NAME OF ACTIVITY	Year 8 Drama Excursion 'Scorch'
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at/on:

LOCATION	Holden Street Theatre, 34 Holden St, Hindmarsh, 5007	DATE OF ACTIVITY	17 th of March 2017
MODE OF TRANSPORT	Private Bus	DEPARTURE TIME	10am
		EST RETURN	12:45pm

If the excursion is not for the full day, the students will be expected to attend normal lessons for the remaining part of the school day. They will need to bring necessary materials and be in school uniform for lessons.

Details of planned activities, transport arrangements and supervising teachers/instructors are provided on the reverse of this page.

Agreement

- I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually. I understand that all school rules, especially regarding tobacco use and general behaviour, apply while on excursion.
- I agree to the transport arrangements as detailed on the reverse of this page.
- In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child.
- I have also submitted health care information, including details of any relevant medical or physical limitations he/she has. I also consent to my child's doctor being contacted in an emergency.
- I understand that all students are required to wear school uniform while representing the school.
- The information given is accurate to the best of my knowledge.

Signed: _____

Date: / /

Emergency Contacts

Parent/Caregiver

NAME			
ADDRESS			
		POSTCODE	
HOME TELEPHONE		WORK TELEPHONE	ALTERNATIVE TELEPHONE

Family Doctor or Medical Clinic

NAME			
TELEPHONE			

DETAILS OF EXCURSION

If transport is by private car provided by a staff member

NAME OF OWNER			
NAME OF DRIVER			
MAKE OF CAR		REGISTRATION #	
NAMES OF ALL STUDENTS BEING TRANSPORTED IN THIS CAR			
OWNER DECLARATION	<p>I, the owner of the above vehicle, give permission for the students named above to travel in my car. I am aware that I can not accept payment from the passengers for this excursion.</p> <p>I declare that the car is fully registered, is covered by a comprehensive insurance policy, is in a roadworthy condition and is fitted with sufficient seat belts for all passengers. I understand that the School Governing Council, Principal and / or DECD will not be liable for any damage to the vehicle, or injury to the passengers or driver in the event of an accident. I guarantee that the driver is the holder of a current, full driver's license that is of the applicable class for this vehicle.</p> <p>OWNER: _____ DRIVER: _____ DATE: _____ (If different from owner)</p>		

COSTS TO STUDENT This is to be paid into the paystation by _____ am / pm _____ (date)

TRANSPORT	\$11.00
FOOD	NA
ENTRANCE FEE	\$12:50
TOTAL COST	\$23.50

ANY FURTHER EXPENSES THAT MAY REQUIRE THE STUDENT TO BRING MONEY ON THE EXCURSION.	NA
ANY ADDITIONAL EQUIPMENT OR CLOTHING REQUIRED. NB: Students are required to wear school uniform.	NA

HEALTHCARE INFORMATION

*Any health care information given will not prevent your child participating unless further medical advice warrants exclusion. The health care information you supply to the school will be treated confidentially by the school. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any student health care problems.

Does the student have any medical condition or other healthcare concern?		Yes	No
If yes, give details			
Are you aware of any medical / healthcare emergency that could arise?		Yes	No
Type of emergency and how to recognise it			
Avoidance precautions			
Emergency treatment			
Does the student take any prescribed medication, including inhalers?		Yes	No
If "Yes", what medication?		Does the student carry own medication?	Yes / No
Dose, when and how often taken			
Side effects?			
Do you have Ambulance Subscription?		Yes	No
If "Yes", which fund?			