

Tewantin SS OSHC Excursion Authorisation Form

Name of Venue XXX	
Description of Venue XXX	
Address of Venue XXX	
Transport arrangements	XXX
Date of Excursion XXX	
Estimated time of departure from AM Service	Estimated time of return to Service PM
Anticipated staff ratio 1: Anticipated numb	er of staff attending X Anticipated number of children attending X
Activities that will be undertaken during the Excursion and links to the service program:	
Guided tour of rainforest. learn about the plants, trees and animals within the rainforest Experience the fun in the Discovery Centre	
Route to be taken:	
As the Parent/Guardian or Authorised Nominee named in the child's enrolment record as having authority to authorise an Educator to take the child outside the education and care service premises, I provide my authorisation for my child to participate in the Excursion as outlined above	
Child/ren Name/s:	
Parent/Guardian/Authorised Nominee Name	
Phone No:	
Signature	Date