



*Holy Cross College,
Ryde*

24th of February 2010

Dear Parent/Guardian

This letter is to inform you that Year 12 Chemistry students will be attending an excursion to Australian Nuclear Science and Technology Organisation (ANSTO), Lucas Heights on Friday the 12th of March 2010. This excursion is a mandatory syllabus requirement for the course and will cover work on Nuclear Chemistry.

The Students will travel by bus, departing from school at 8:30 am and will be returning at approximately 3:15pm. Students are to wear their full college uniform. No non uniform items will be permitted at any stage during the day. (I.e. no non HCC hats, jumpers, jewellery etc). Similarly no walkman, mobile phones or other electrical devices are allowed.

Students may bring their recess and lunch but there are facilities available at ANSTO. They will be required to bring pens, clipboard and their workbook.

Excursion details:

Date: Friday 12th of March, 2010

Where: ANSTO, Lucas Heights

Departure: 8:30am sharp

Cost: \$27

Please sign the attached slip giving permission for your son to attend the excursion. The students will be supervised by the teachers traveling with them.

Please return the slip and payment to the office by no later than Friday the 5th of March 2010.

Yours sincerely,

Cecilia Bartos
Chemistry Teacher

Joelle Camps Vasquez
Science Coordinator

RETURN SLIP

Please Return By:- _____

Student's Name: Homeroom Class:.....

To the best of my knowledge my son/ward has no medical condition, disability or injury which puts him at risk in participating on this trip.

As the College subsidises the cost of the event, and this is determined by the number of students expected to attend, refunds for absentees will not be given unless a doctor's certificate is provided to the Year Coordinator.

Special needs of my son/ward which you should be aware of are:-

In the event of illness, I authorise the seeking of such medical assistance on my behalf that my son/ward may require.

CONTACT PHONE NUMBERS

<i>Work</i>	<i>Home</i>	<i>Mobile</i>	<i>Medicare Number (for use at medical centres etc.)</i>

I am agreeable to my son/ward going on the Excursion and I am enclosing

\$..... to cover the cost, OR

Parent/Guardian Signature: Date:

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I hereby authorise Holy Cross College

to charge my Credit Account for the amount of \$ _____

Card details:- (Please circle one) Visa / Mastercard

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Cardholder's Name: Expiry Date:

Signature: