



EXCURSION NOTE

Excursion:	You Choose – Youth Road Safety		Maximum # of students:	Yr 10
Subject / Purpose:	Guest Speaker for Road Safety choices and consequences		Grade:	Year 10
Venue:	School Hall GHS	Date:	Thursday 27 th Feb (Week 5)	
Departure time:	9:00am	Return time:	10:20am	
Students will depart from:	School	Students will return to:	School	
Travel/transport will be by:	N/A (Students will remain at school).			
Dress requirements:	Full school uniform			
Cost: NON-refundable	\$0	Payment due by:	N/A	
Supervising teacher/s:	Miss Hobday (PDHPE) and Year 10 Teachers			

Dear Parent/Carer,

I am writing to inform you that on Thursday 27th February, we have Melissa McGuinness from **'You Choose – Youth Road Safety'** coming in to speak to our Year 10 cohort about road safety choices and consequences, which aligns with their Risky Business Unit in PDHPE for Term 1. Melissa McGuinness is a Gold Coast resident and mother of 3 children, who is continuing to live with the loss of her 18-year-old son in a road accident in 2012.

We recognise and understand that some students might find Melissa's story upsetting and confronting, but we believe that it is important to expose our students to real life lessons, and this one will be particularly relevant to a group of young people who are just beginning their preparation for an experience of driving. If you would like to gain an insight into what Melissa's presentation is about, please visit her [Facebook 'You Choose – Youth Road Safety'](#) page.

Please note that there may be a maximum number of students who may attend this event (see above). The signed permission note must be returned to the front office. We strongly encourage your child to attend this activity, as it will be a positive and valuable learning experience.

Mrs K O'Connor
PDHPE Head Teacher

Sonja Anderson
Principal

Date:

YEAR 10 EXCURSION TO YOU CHOOSE – YOUTH ROAD SAFETY PERMISSION NOTE / MEDICAL INFORMATION

I do / do not consent to my child participating in an excursion to
You Choose – Youth Road Safety on **Thursday 27th February (Week 5)**

I understand and agree to the requirements and arrangements as stated on the excursion note.

Special needs, allergies or medical condition/s that the school should be aware of:

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Has the school been provided with an individual health plan or emergency response plan for this condition? **YES / NO**
I give / do not give permission for my child to receive medical treatment in case of emergency.

Medicare No:	Expiry Date:	Card Reference No:
Parent/carer's signature:	Date:	
Parent/carer's email:	Phone number:	