

Excursion INFORMATION

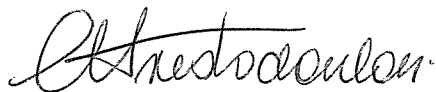
Please complete and return the attached consent form to the by the Tuesday 19 May.

Dear parent/guardian,


- A group of year 10 & 11 students will be going on an excursion to Black Market Training-Marrickville to participate in the **Barista Skills Program** on Tuesday 2 June 2026.
- **The Barista Skills Program** is suitable for anyone wanting to work in Hospitality industry. Students will gain practical experience and will receive a **Certificate of Completion**.

Students will complete:

- 4 hours face-to-face practical skills
 - 1 hour online learning, instructional videos and quiz
 - Students receive a Certificate of Completion + a Digital Credential
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- The cost of the excursion is **\$60 per student** which is to be paid to the administration office by **Tuesday 19 May**.
 - Year 10 & 11 will meet at **GyMEA Train Station** on Tuesday 2 June at **8:50 AM** and return to **GyMEA Train Station** at **3:00 PM** on Tuesday 2 June.
 - Travel will be by Train and Walking. **STUDENTS ARE REQUIRED TO BRING THEIR OPAL CARD!**
 - Accompanying staff are: V.Hristodoulou
 - School Uniform is to be worn to this excursion.
 - The contact number during the excursion is 9521 3244.



V.Hristodoulou
Teacher



Mrs K. Edwards
Deputy Principal

Permission Note for Barista Skills Program 2026 on Tuesday 2 June 2026

Please complete and return this consent form to the _____ by the Tuesday 19 May.

CONSENT

I hereby consent to in Year participation in an excursion to Black Market Training- Marrickville on Tuesday 2 June 2026.

SPECIAL NEEDS

Special needs of my child which you should be aware (eg. allergies, medication - please provide full details)

MEDICAL

I give permission for my child to receive medical treatment in case of emergency. YES / NO (please circle)

Signature of Parent/Guardian

Name of Parent/Guardian

Date

Privacy Advice

The information provided on this consent form by the parent or caregiver is being obtained for the purpose of conducting a school excursion detailed above. It will be used by the NSW Department of Education for seeking consent for the child to undertake activities within this excursion activity. Provision of this information is required by law / voluntary. It will be stored securely. You may correct any personal information provided at any time by contacting the school on 9521 3244

PAYMENT

Payment for Barista Skills Program 2026. Student Name: _____

I have made a payment online of \$60 for this excursion.

For online payments please go to the school's website at <https://gymeaths.nsw.edu.au> to pay through schoolbytes. Choose Payments and then choose the selected excursion from other items.

Barista Skills Program Amount: **\$60**

I have made a payment at the school office of \$60 for this excursion. (Payment made by cash or card)