



# BELLATA PUBLIC SCHOOL

Gurley Street, Bellata NSW 2397  
Phone: 02 67937514  
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## PERMISSION NOTE

I give permission for my child/children \_\_\_\_\_

to attend the \_\_\_\_\_

to be held at \_\_\_\_\_ on \_\_\_\_\_

My child's special needs are:

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### Transport Arrangements:

- ❖ I am able to provide transport for my own child/children YES/NO
- ❖ Number of children I can take, other than my own \_\_\_\_\_
- ❖ I have organised transport with \_\_\_\_\_

Name \_\_\_\_\_

Signed \_\_\_\_\_  
(Parent/Guardian)

Date \_\_\_\_\_