

2 June 2026



Creating the Future

# LOWOOD

STATE HIGH SCHOOL

PO Box 138, Prospect Street, Lowood QLD 4311

Dear Parent/Carer

## Lowood State High School – Year 6 Electives Experience Days

Lowood State High School would like to offer your student the opportunity to take part in two Electives Experience Days on Wednesday 24 June and Thursday 25 June 2026. The aim of these days is to give students in **Year 6** the opportunity to come and trial some of the elective subjects that will be offered to them in Year 7 in 2027. This will allow students to make more informed choices when choosing their Year 7 electives when they have their enrolment interview later this year.

Throughout the two days, students will experience elective subjects such as **Visual Art, Dance, Drama, Music, Materials and Technologies Specialisations, Business Studies and Horticulture**. This opportunity will enable students to become familiar with the school and staff members, and will assist students in transitioning more easily into our high school.

On the day, students are required to make their own way to Lowood State High School or they may use the regular bus services provided. If you are wanting your student to access the bus service, please ensure you know the bus route number and the pick up and drop off locations. Please contact Q Bus on 5462 1088 to arrange this.

This exciting opportunity links to the following PERMAH Pillars:

**E - Engagement** – engaging with and learning about elective subjects

**R - Relationships** – meeting new friends and teachers

### Activity Details

**Venue:** Lowood State High School

**Cost:** Nil

**Date:** Wednesday 24 June and Thursday 25 June 2026

**Transport** Own transport or Q Bus School Bus Service

**Start:** 8:50am – 3:00pm - Students are to meet at the school Hall

**Equipment:** Primary school uniform and enclosed footwear, bring your Music instrument (if applicable)  
Dance and Drama students need to ensure they can move comfortably in their uniform or can bring shorts or tights to change into

**Lunch:** Students may bring their lunch or teachers will assist students to pre-order at the LSHS Canteen – see attached menu

**Risk Level:** Dance and Manual Arts activities have **medium risk rating**; correct techniques are taught to avoid injury. In alignment with safe work practices, **student behaviour** needs to be of a high standard

The '**Phones away for the Day**' policy applies at Lowood State High School. Consequences will apply to students who do not follow Lowood State High School's Mobile Phone Policy.

Please complete the attached **Activity Consent Form** and return to **Lowood State High School** by Tuesday 16 June, 2026.

For further information about this activity, please contact Kristie-Lee Doyle on 5427 8333 or via email [kdoyl62@eq.edu.au](mailto:kdoyl62@eq.edu.au). We look forward to your student joining us here at Lowood State High School.

Yours sincerely

Kristie-Lee Doyle  
HOD – VPM Arts

Stacey Beu  
Principal



# Activity Consent Form – Electives Experience Day 2026

## Activity Details

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**Cost:** Nil  
**Date:** Wednesday 24 June and Thursday 25 June 2026  
**Transport:** Own transport  
**Start:** 8:50am – 3:00pm Student are to meet at the school Hall  
**Equipment:** Primary school uniform and enclosed footwear, bring your Music instrument (if applicable)  
Dance and Drama students need to ensure they can move comfortably in their uniform or can bring shorts or tights to change into  
**Lunch:** Students may bring their lunch or teachers will assist students to pre-order at the LSHS Canteen – see attached menu  
**Risk Level:** Dance and Manual Arts activities are **medium risk**; correct techniques are taught to avoid injury. In alignment with safe work practices, **student behaviour** needs to be of a high standard

The 'Phones away for the Day' policy applies at Lowood State High School. Consequences will apply to students who do not follow Lowood State High School's Mobile Phone Policy.

If you are unable to attend both days please indicate which day you will be attending

Wednesday 24 June 2026  Thursday 25 June 2026

## Consent Details

Student/Person's Name (in full): \_\_\_\_\_ Year Level: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Name of Parent/Carer: \_\_\_\_\_

Home Address: \_\_\_\_\_

Contact Details: Phone \_\_\_\_\_ Email \_\_\_\_\_

Student's Primary School: \_\_\_\_\_

## Consent

By signing this form, I agree to all the following statements:

- I have read all of the information contained in this form in relation to the activity (including any attached material)
- I am aware that the department does not have personal accident insurance cover for students.
- I give consent for the named student to participate in the identified activity.
- I will pay to the school the costs detailed in this consent form for the student's participation in the activity.
- I agree to and understand the refund policy as it applies to this activity (see Activity costs)
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment the student may reasonably require, including contacting their doctor.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school with all relevant details of the student's medical or physical needs on registration/enrolment and where relevant have updated this information.
- I give consent for student contact information to be shared in relation to this activity in compliance with relevant Queensland Chief Health Officer's Directions.

## Activity Risks and Insurance

The Department of Education does not have personal accident insurance cover for students. If a student is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carers. Some incidental medical costs may be covered by Medicare. If the parent/carers has private health insurance, some costs may also be covered by your provider. Any other costs must be covered by the parent/carers. It is up to the parent/carers to decide the type/s and level of private insurance they wish to arrange to cover their student. Please take this into consideration in deciding whether or not to allow the student to participate in this activity.

# Activity Consent Form – Electives Experience Day 2026

## Privacy Statement

The Department of Education is collecting the personal information in this form in order to:

- obtain consent for the named student to participate in this activity;
- help coordinate the activity;
- respond to any injury or medical condition that may arise during or as a result of the activity; and
- update school records where necessary.

The information will only be accessed by authorised departmental staff. The information will not be disclosed to any other person or agency unless we have your consent or we are required or authorised by law to do so e.g. in compliance with relevant Queensland Chief Health Officer's Directions.

## **Parent/Carer must sign here to Consent to Activity.**

Parent/Carer Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## **Additional Medical Information**

The school collected medical information about your student on their enrolment. This information is stored electronically in OneSchool. Please give full details of any new or updated medical information which may affect your student's full participation in the activity described in the Parent/Carer Letter and on the Activity Consent Form.

## **You may also wish to provide the following optional information**

Name of Student's Medical Practitioner: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Medicare No: \_\_\_\_\_

Private Health Insurance Company (if applicable): \_\_\_\_\_ Membership No: \_\_\_\_\_

If you would like this additional information to be recorded in OneSchool records, please complete a Student Details Information Update Form. The Student Details Information Update Forms are available at the Office.

\*Students who are independent, mature-age or over 18 years of age may provide their own consent and be responsible for all related costs.

## **Medication requirements**

Will your student require medication during this activity/camp? Yes  No

Does the student require staff to administer their medication? Yes  No

Does the student have approval to self-administer their medication at school? Yes  No



# LHS Canteen Menu



<b>BURGERS and HOT FOOD</b>	<b>SANDWICHES / ROLLS/WRAPS</b>	<b>MILK</b>
* Chicken Burger, Pattie, lettuce, mayo	* All Toasties	* 300ml Flavoured \$3.00
* Chicken Tender, Tender, lettuce, Kebab Sauce	* Ham and Cheese	* 500ml Flavoured \$4.50
* Hamburger, Lettuce Tomato Carrot Beetroot (Orders Only)	* Ham, Cheese and Tomato	* 500ml Plain Milk \$3.00
* Cheeseburger, Pattie, Cheese lettuce, BBQ sauce	* Cheese	
* Chicken Tastie, Sweet Chili Sauce, Cheese, Tender (Toasted in a Wrap)	* Cheese and Tomato	<b>JUICE</b>
* Meat Ball Sub, 4 Meatballs in Bolognese Sauce	* Chicken, Cheese and Mayo	* Poppers \$2.00
* Chicken and Gravy Roll	* Salad Sandwich	* 250ml \$3.00
* Chicken Kebab (Orders Only)		* 350ml \$4.00
* Garlic Bread	<b>TUBS Salad/Fruit</b>	
* Pizza (Thursday & Friday)	* Salad container small	<b>WATER &amp; ICE TEA</b>
* Meat Pie / Potato Pie	* Salad container large	* 600ml Water \$1.50
* Sausage Roll	* Watermelon	* 1.5ltr Water \$2.50
	* Rockmelon	* Flavored Water \$4.00
<b>MEALS (when available)</b>	<b>EXTRAS</b>	* Bare Mineral Water \$3.50
* Butter Chicken \$6.00	* Egg \$0.50	* Amaya Peach Tea \$4.50
* Fried Rice \$6.00	* Meat \$1.50	<b>TREATS</b>
* Sweet & Sour Chicken \$6.00	* Cheese \$0.50	* Frozen Yoghurt \$2.50
* Spaghetti and Meatballs \$6.00		* Ice Cream Various \$2.00
		* Fruit Tube \$0.80
		* Cup Cakes \$0.50

Prices are subject to change at the discretion of the P&C

Lunch Orders before 1st bell welcome

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