Excursion, Performance and Activity Consent Form

1st August 2022

Dear Parents and Carers,

An excursion, performance or activity has been organised for your child. The information is as follows:

Title	2022 Year 6 Canberra Excursion	
Brief Description	cription To support the Year 6 HSIE Units "Australia as a Nation" and "Democracy".	
Venue	Canberra	
Day and Date	New dates: Monday 17 th October 2022 – Thursday 20 th October 2022	
Time of departure and return	Depart: 6:00am Arrive: 5:30pm	
Group / Year / Classes involved	All Year 6 students	
Transport	Coastal Liner coach	
	The total cost of the excursion is \$520 (this includes the \$50 deposit)	
Cost	All payments must be finalised by Friday 26th August 2022 Term 3 Week 6.	
	In the event of a student's non-attendance, the original deposit is non-refundable. In case of financial difficulties, please contact the Deputy Principal, Mrs Rees.	
Accompanying staff	Mr Smith, Mrs Tyson, Mrs Tadman and Mr Stone	
Staff member with CPR/emergency care training	All staff	
Dress requirements	Refer to "Gear Checklist" attached. Full school uniform to be worn on Day 3, for the visit to the National War Memorial and Parliament House.	
Other requirements	Please provide your child with lunch, recess and afternoon tea for Day 1. All other meals will be provided.	
Behaviour	Student behaviour is considered when assessing the risk of excursions and extra-curricular events for the health and safety of all students and staff. Students must behave appropriately at all times on excursions. The school's discipline policy applies for the duration of this event.	
Organising Teacher	If you have any questions or require further information regarding this event, please contact the organising teachers: Mrs Tyson , Mrs Tadman & Mrs Glenys Jenkin at school on 4384 1111.	

Please complete the attached permission note and medical information and return to classroom teacher by 26/8/22

Wamberal Public School Excursion, Performance and Activity Consent Form

Privacy Note: The information provided below is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about the student who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Wamberal Public School.

It will be used by officers of the NSW Department of Education to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

You may correct any personal information provided at any time by contacting the school office.

TITLE OF EXCURSION, PERFORMANCE OR ACTIVITY: 2022 Year 6 Canberra Excursion ORGANISING TEACHERS: Mrs Tyson, Mrs Tadman & Mrs Glenys Jenkin Permission note and payment due by Friday 26th August 2022.

Ge	neral Permission Details - please tick ar	id complete all details			
	I consent to		participating in the Year 6 Canberra		
	excursion on Monday 17 th October –	Fhursday 20 th October.			
	I consent to the travel arrangements f	or this event.			
	The cost of this event is \$520. I enclose	se as payment fo	or the event.		
	OR				
	I have paid for the event via the school website and my receipt number is OR				
	I have already paid for this event in 2021.				
	My son / daughter has the following special needs (please provide full details and include any relevant medical details)				
When a medical practitioner has prescribed medication (including emergency medication) that will need to be administered during the excursion, parents are responsible for: Bringing this need to the attention of the school, including completing a written request to administer medication (forms are available from the front office or via the school website). Ensuring that the information is updated if it changes. Supplying the medication and any 'consumables' necessary for its administration in a timely way. The medication should be well within its expiry date. Collaborating with the school in working out arrangements for the supply and administration of the prescribed medication for the duration of the excursion. For some excursions the school will ask you to supply the medication in a different way to what has been already been agreed to by school. You may be asked to supply an additional adrenaline autoinjector (i.e. EpiPen® /Anapen®) for example. For asthma and anaphylaxis it is important for students to have immediate access to their medication. Please consider whether your child should carry their own EpiPen®, Anapen® or asthma reliever medication to school and while they are at school. If you would like the school to consider your request for your child to carry their medication, please complete the form 'Request for student to carry his/her own medication' form available for download from our school website.					
□ I give permission for my child to receive medical treatment in case of emergency.					
□ Pa	My Medicare number is:rent / Carer Name:				
Pa	rent / Carer Signature:	Date:			
Со	ntact number on the day:				

2022 YEAR 6 CANBERRA EXCURSION GEAR CHECKLIST

Students should bring <u>one travelling case</u> which is clearly labelled with your child's name. Students should also bring <u>one smaller</u>, lighter bag that may be used as a backpack. Please find a gear checklist to help in your preparation (*label everything with your child's name and school*).

- <u>Medication</u> labelled with name and dosage to be handed to the organising teacher on the morning of departure.
- Travel sickness medication If students suffer from travel sickness they should take appropriate medication before we leave on Monday morning. Students should take enough medication with them for the rest of that trip and the return journey on Thursday. This should be handed to the teachers on the morning of the excursion (as above).

On the bus:

Please note the larger suitcase will not be accessed until late Monday on arrival at the motel.

- Day pack (small backpack/school bag)
- Recess, lunch and afternoon tea for Monday
- 2 water bottles

In travelling case:

- Souvenir money (optional maximum of \$40, given to their class teacher on Monday morning)
- Suitable casual clothing for four days and three nights
- Full school uniform (including school shoes) must be worn on Wednesday of the excursion as we are visiting the War Memorial and Parliament House
- 1 or 2 jumpers
- Warm Jacket (the weather may be warm or cold especially in the evening)
- Socks
- underwear
- Sunscreen
- school hat
- Toiletries including soap and toothbrush
- Raincoat
- <u>Two</u> pairs of sneakers or enclosed shoes
- Pyjamas
- Plastic bag for dirty or wet clothes
- Handkerchief or tissues
- Pen / pencils

NO MOBILE PHONES are to be taken. (In an emergency, parents can contact the school or motel). Please do not allow children to bring singlets, computer games, lollies, chewing gum, jewellery, or anything else of value.

Any valuables such as cameras etc. are the sole responsibility of the student. These items must be clearly labelled with name and class.

Medical information Form – For Overnight Excursions PLEASE RETURN THIS FORM TO THE SCHOOL BY 26 August 2022

The information provided on this medical information form is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs of your child who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Wamberal Public School.

It will be used by officers of the NSW Department of Education to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

You may correct any personal information provided at any time by contacting the school office.

Student name:			Class:			
Medicare num	ber (optional)					
Parent or caregiver contact details						
Name:	ame:					
Address:	Address:					
Home phone:		Work:	Mobile:			
Doctor contact details						
Name:	'ame:					
Address:	ss:					
Doctor's telephone:		1	2			
Emergency contact(s) details (nominated by the parent or caregiver as alternate contact)						
1. Name:			Phone:			
Relationship to student						
2. Name:			Phone:			
Relationship to	o student					

List existing medical conditions or illnesses (include asthma, diabetes, Outline the treatment for each.	epilepsy, allergies etc.).			
Outline special dietary needs including possible reaction to inappropria	ate diet			
Medication(s) to be administered during the excursion. Include name of	f medication, instructions for			
Medication(s) to be administered during the excursion. Include name of medication, instructions for administration, time of administration, and any possible reactions				
Further information / comments				

Parent/Carer Signature:	Date:				
Overnight excursions					
I do not / do give permission for my son / daughter to stay overnight at Can	berra Park Resort.				
I have completed and attached the medical details information in relation to my child's attendance of this excursion.					
Overnight excursions code of conduct – To be completed by the student					
I of Class ago	ree to abide by the following CODE				
OF CONDUCT. I understand that any serious violation of the code may place my participation in future overnight excursions at risk and I may be returned home from the excursion.					
I agree to:					
 represent my school, my family, and myself in a positive manner; respect the rights of other people, both those participating in the excursion and the general public; follow any directions given by supervising staff, teachers, adult helpers, coach drivers, tour guides etc; take responsibility for organising my personal belongings; not to engage in activities that may impact on the ability of others to get a good night's sleep; be patient with others; take responsibility for gaining the maximum benefit from the excursion by completing required activities; behave in a safe and responsible manner; and wear appropriate clothing required by the teachers. 					
Student's Signature Date					
Overnight excursions code of conduct – Parent or Carer					
I have discussed the above <i>Code of C</i>	Conduct with my child and expect				
them to abide by the guidelines.	, characteristics, characteristics				
I am aware that poor behaviour may lead to my child being sent home from this ex responsible for collecting my child from the excursion venue if there is a serious broader.					
Signature (Parent/Guardian) Da	ate				
Permission to view PG Rated Movies:					
Name: Class:					
Whilst on camp, we generally watch G rated movies but occasionally there is a PG movie. DVDs will be provided.					
 I give permission for my child to view PG movies whilst on the Year 6 Canberra Excursion I DO NOT give permission for my child to view PG movies whilst on the Year 6 Canberra Excursion. 					

Date:

Signed: