

Wamberal Public School

Expression of Interest for School Representation

Anzac Day Dawn Service, Terrigal Beach

28/03/2023

Dear Parents and Carers,

| Brief Description | Students in our 3-6 choir are invited to participate in a Combined Public Schools Choir for the Anzac Day Dawn Service at Terrigal Beach. | |
|--|---|--|
| Group / Year / Classes involved | | |
| When | Tuesday 25 April, 2023 Please note this is a Public Holiday. | |
| Venue | Terrigal Beach, Terrigal | |
| Arrival | Students will meet Mrs Burgess on the concrete near the grassed area adjacent to the main presentation area at 5:00am , where they will have their names roll marked on arrival. Students are required to be in position for the choir for the start of the service and will not be able to march. | |
| Departure | Students will remain in their performance positions at conclusion of the performance. We ask parents to please collect their own children from this spot. Your child will need to have their name marked off the roll by Mrs Burgess before departing. As we have a large number of students performing, we appreciate your patience when collecting your child so that all students can be picked up safely. Any variations to departure need to be addressed to the school in writing prior to the event. | |
| Dress requirements | Full school uniform including black shoes. | |
| Other information | The main roads into Terrigal will be closed at 4:30am. The march is due to start at 5:15am and service is due to start at 5:00am. The choir will perform two songs – one at the start of the program and one at the end of the program. In the event of wet weather, the service will still go ahead. Students may wear a clear rain poncho if it is raining. No umbrellas please. The service will go for approximately one hour. | |
| Cost | Nil | |
| Behavior | 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 Student Behaviour Policy applies for the duration of this event. | |
| Drganising Teacher If you have any questions or require further information regarding this event, please contact Sherri Burgess at school on 4384 1111. | | |

Sherri Burgess Organising Teacher

Paul Miller, Principal

--->--- Please complete the attached permission note and medical information and return to the office by 6 April, 2023.

Wamberal Public School

Anzac Day Dawn Service 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.

General Permission Details - Please tick and complete all details

Wamberal Public School 3-6 Choir Anzac Day Dawn Service at Terrigal ORGANISING TEACHER: Sherri Burgess Note due by 6 April 2023

| | I consent to of 0 Schools Choir at the Anzac Day Dawn Service at Terr | Class rigal Beach o | participating in the Combined Public 1 Tuesday 25 April, 2023 (Public Holiday). | | | |
|---|--|------------------------|--|--|--|--|
| | | | | | | |
| | My son / daughter has the following special needs (please provide full details and include any relevant medical details) | | | | | |
| | en a medical practitioner has prescribed medication (including emergency consible for: | / medication) that | will need to be administered during the excursion, parents are | | | |
| • | 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 treatr My Medicare number is: | | of emergency. | | | |
| Parent / Carer Name: | | | | | | |
| Parent / Carer Signature: | | Date | : | | | |
| Contact number on the day: | | | | | | |
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