

EXCURSION NOTIFICATION and PERMISSION LETTER

Keep ONE COPY for your information, SIGN AND RETURN THE OTHER TO SCHOOL by

Thursday 21st September 2017



Student:	
Teachers in charge:	Monica Jackson and Hayley Spector. Education Support Staff: Lydia Woodward

Program: JJ and JS1 - Community Access, Term Four 2017						
Date: Thursday:	Departure time:	Return time:	Activity and Location(s): Address and telephone (if applicable)	Mode of transport:	Staff:	Cost:
12 October	1:20pm	2:45pm	Carrum Downs Recreational Reserve 45R Wedge Road, Carrum Downs 3201 Melway: 98 H10	Bus	M Jackson H Spector	Nil
19 October	1:20 PM	2:45 PM	Overport Park Overport Rd, Frankston Sth 3199. Melway: 102 C12.	Bus	M Jackson H Spector	Nil
26 October	11:10AM	2:45 PM	The Big Goose 233 Mornington-Tyabb Rd, Moorooduc VIC 3933 Melway: 147 E9	Bus	M Jackson H Spector	\$16-
2 November	1:20 PM	2:45 PM	McClelland Sculpture Park and Gallery 390 McClelland Dr, Langwarrin VIC 3910 Melway: 103 E3	Bus	M Jackson H Spector	Nil
9 November	9:00 AM	2:45 PM	Koala Conservation Centre 1810 Phillip Island Rd, Phillip Island VIC 3923 Melway: 732 B5	Bus	M Jackson H Spector	\$5.60-
16 November	12:30PM	2:45 PM	Pelican Park Recreation Centre 2 Marine Parade, Hastings VIC 3915 Melway: 154 K11	Bus	M Jackson H Spector	Nil
23 November	11:00AM	2:45 PM	Village Cinema – Vjunior Fountain Gate or Southland – Location to be advised closer to the date. More information/forms to come	Bus	M Jackson H Spector	\$19-
30 November	12:30PM	2:45 PM	Casey Fields Regional Playspace, 160 Berwick-Cranbourne Road, Cranbourne East 3977. Melway: 134 E7	Bus	M Jackson H Spector	Nil
7 December	1:20 PM	2:45 PM	Ballam Park Playground 260R Cranbourne Road, Frankston 3199. Melway: 103 B4	Walk	M Jackson H Spector	Nil
14 December	11:10AM	2:45PM	Christmas Kingdom - \$3 to purchase a small Christmas decoration 219-221 Nepean Hwy, Mentone VIC 3194 Melway: 86 K2 Bicentennial Park Playground Thames Promenade & Scotch Parade, Chelsea VIC 3196 Melway: 93 D12	Bus	M Jackson H Spector	\$3- (must be cash, not CSEF)
21 December	12:00PM	2:45 PM	Peter Scullin Reserve Cnr Centreway and Beach Rd, Mordialloc 3195, Victoria Melway: 92 E1	Bus	M Jackson H Spector	Nil

*In the event of unsuitable weather or other unforeseen circumstances the students will stay at school.

Student accident insurance

The Department of Education does not provide student accident cover. Parents may wish to obtain student accident insurance cover from a commercial insurer, depending on their health insurance arrangements and any other personal considerations.

This permission form must be returned by: Thursday 21st September 2017.	
If you have elected to not return this form, we understand that you have chosen for your child not to participate.	
Students need to bring/wear	Warm weather: a water bottle, sunscreen and sun hat. Cold weather: a coat. All day excursions: lunch, snack and a water bottle all in disposable containers in a named plastic bag. Please name all items
Total cost: \$40.60	Note: \$3 for Christmas Kingdom must be in cash, NOT CSEF
If applicable I authorise the school to use my CSEF – Camps, Sports & Excursions Fund <input type="checkbox"/>	
Purpose: To develop children's social, emotional, language and maths skills and knowledge; to explore the local environment and develop an awareness of conservation and sustainability; to practice safe bus behaviour and the opportunity to transfer skills from the school setting to a variety of public settings.	

Parent Consent

Student behaviour

I understand that in the event of my son's/daughter's misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.

Consent for emergency transportation

In the event of an emergency I consent to my child being transported in a privately owned vehicle driven by a member of the supervisory staff.

Change to Medical Condition

Has there been any change to your child's medical condition? Yes No

If yes, please provide relevant details.

Medication

Is your child taking any medicine(s)? Yes No

If yes, provide the name of the medication, dose and describe when and how it is to be taken.

Medical consent

Where the teacher-in-charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher-in-charge to:

- Consent to my child receiving any medical or surgical attention deemed necessary by a medical practitioner.
- Administer such first aid as the teacher-in-charge judges to be reasonably necessary.

If my contact details change, I will notify the school office.

I have read all of the information provided by the school in relation to the excursion.

Parent/guardian: _____ (full name)

_____ (signature) _____ (date)

In case of emergency I can be contacted on:

_____ OR: _____