PLENTY PARKLANDS PRIMARY SCHOOL

Date: 6/11/2019

TITLE: EXCURSION **CURRICULUM AREA:**	**Year 4 Fun Day** **(FUN) SPORTS**
HOME GROUPS INVOLVED:	4-29, 4-30, 4-31, 4-32
VENUE:	**Epping Leisure City & Oz Ten Pin Bowling, Epping.** 41 - 53 Miller St, Epping VIC 3076
DATE OF EXCURSION/SPECIAL EVENT: **Mode of travel: Diamond Coaches** (seat belted buses)	**Date:** Monday 16th December 2019 **Departing at:** 9.15 am **Returning at:** 2.30 pm
COST: (Reminder: If there is any difficulty in paying on time, please phone the Principal or Business Manager to discuss arrangements).	**$ 24.00**
WHAT TO BRING:	A snack, lunch, water bottle in a small back pack and comfortable running shoes. Students are to wear full school uniform, including a school sunsmart hat.
PARENTAL ASSISTANCE REQUIRED:	Parent volunteers must have completed the Volunteer Training Program and hold a valid WWC check. Please reply by: 12/11/2019 Volunteers will be notified by: 26/11/2019
SPECIAL MEDICAL REQUIREMENTS OF YOUR CHILD:	Reminder: It is a parent/guardian's responsibility to send any specific medical requirements, such as asthma puffer, etc**.** Pack your child's medication and hand it (with specific instructions) to your child's teacher. It is a teacher's responsibility to collect the Epipen bag from the first aid room or the hypo kit from the classroom.
NOTICE AND PAYMENT MUST BE RETURNED BY: *Please note: payment will NOT be accepted after the due date*	**3.30pm Monday 9th December, 2019**

Parent assistance: Please provide the following details by **e-mail to** matheson.jeremy.j@edumail.vic.gov.au **or note** to your child's teacher if you are able to assist on the day:
Student's name and home group, adult's name and daytime contact phone number.

I am available to help with the Year 4 Fun Day excursion on Monday 16/12/2019. I understand that because of my duty of care for the students at PPPS, I cannot bring other children on the excursion. I have completed the Volunteer Training Program and hold a valid WWC check. I understand my responsibilities to live by the PPPS values and abide by the excursion protocols. I also agree that I will not take phone calls from, or phone, text, or send photos to other Plenty Parklands families while on the excursion. I agree to wait until after the excursion before posting photos of my child on any form of social media. I understand that I do not have permission from the school or other families to post photos of other children. If in the case that more parents volunteer than places available, the teaching staff in the unit will make the decision as to which parent/s is/are best suited to assist with the excursion

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If paying by cash/ credit card/ or CSEF please return permission section to the school by the due date.
No need to return permission section if paying by Qkr.

I give permission for my child _____ of home group _____to attend the excursion to Epping Leisure City and Oz Ten Pin Bowling, Epping on Monday 16th, December 2019.

If the emergency contacts are unavailable I authorise the teacher in charge to consent to my child receiving such medical treatment as deemed necessary by a medical practitioner.
☐Yes ☐No If no consent is given what should the school do? _____

Emergency contacts on the day of the excursion

Name _____ Phone no: _____

Name _____ Phone no: _____

Preferred Payment Method Qkr! by MasterCard

Date _____ Signature _____

Amount enclosed: _____ _____ **QkR /**Cash/Credit Card/CSEF (please circle)

Credit Card payment ✂----------

PLENTY PARKLANDS PRIMARY SCHOOL – CREDIT CARD VOUCHER (to be used for amounts of $10 and over)

Child's name	Home group	Payment for:	Amount
		Year 4 Fun Day	$24

Please charge my: ☐ Bankcard ☐ Visa ☐ Mastercard Amount: $ _____

Card Number __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ Expiry Date: __ __ / __ __ Name on Card: _____

Signature of Cardholder: _____ Phone No._____ Date: _____