PLENTY PARKLANDS PRIMARY SCHOOL	
EXCURSION/SPECIAL EVENT NOTICE Date: 8.9.2017	
TITLE: CURRICULUM AREA:	Cooper's Settlement Heritage Village Humanities
HOME GROUPS INVOLVED: VENUE:	All year 1 classes Bundoora Park, Bundoora
DATE OF EXCURSION/SPECIAL EVENT: Mode of travel: bus	Monday 23 rd October Departing at: 9.30am Returning at: 3.00pm
COST: Reminder: If there is any difficulty in paying on time, please phone the Principal or Business Manager to discuss arrangements.	\$23
WHAT TO BRING: (Sunscreen – to be reapplied every two hours if the activity is outdoors)	Sunsmart hat, snack, lunch and water bottle in a small backpack Appropriate clothing and footwear for outdoor activities
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.
PARENTAL ASSISTANCE REQUIRED:	Parent volunteers must have already completed the Volunteer Training Program and hold a valid WWC check. Please reply by: Friday September 15 th Volunteers will be notified by: Tuesday September 19 th
NOTICE AND PAYMENT MUST BE RETURNED BY: Please note: payment will NOT be accepted after the due date.	Monday 16 th October
If paying by cash/ credit card/ cheque or CSEF please return permission section to the school by the due date. No need to return permission section if paying by Qkr.	
Parent assistance (please notify the staff member listed if you are able to assist on the day)	
Please provide the following details by e-mail to Ms Sarah Cunningham cunningham.sarah.j@edumail.vic.gov.au Student's name and home group, Adult's name and daytime contact phone number	
I am available to help with the year 1 excursion on Monday 23 rd October, 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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I give permission for my child	of home group to attend the excursion to
If the emergency contacts are unavailable I authorise the team necessary by a medical practitioner.	cher in charge to consent to my child receiving such medical treatment as deemed
Yes No If no consent is given what should the school do?	
Emergency contacts on the day of the excursion	

Phone no: Name Phone no: Name Preferred Payment Method _____ Signature ____ Amount enclosed: ______QkR /Cash/Cheque/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: eg. Camp ☐ Visa ☐ Bankcard Mastercard Amount: \$ _____ Please charge my: Name on Card: _____ Expiry Date: ___ / ___ Signature of Cardholder: _____ Date: _____