

# PLENTY PARKLANDS PRIMARY SCHOOL

**EXCURSION/SPECIAL EVENT NOTICE**

**Date: 26/4/2018**

<b>TITLE:</b>	‘Scienceworks: Electrical Energy, Safety and Lightning’
<b>CURRICULUM AREA:</b>	Science
<b>HOME GROUPS INVOLVED:</b>	4-29 4-30 4-31 4-32
<b>VENUE:</b>	Scienceworks <small>2 Booker St, Spotswood VIC 3015</small>
<b>DATE OF EXCURSION/SPECIAL EVENT:</b> Mode of travel: Coaches	<b>Date: TUESDAY 29<sup>th</sup> MAY 2018</b> <b>Departing at: 8:45am – CHILDREN NEED TO BE AT SCHOOL AT 8:30am</b> <b>Returning at: 3:00pm</b>
<b>COST:</b> Reminder: If there is any difficulty in paying on time, please phone the Principal or Business Manager to discuss arrangements.	<b>\$20.00</b>
<b>WHAT TO BRING:</b>	Wear a warm jacket, school uniform, and suitable shoes for walking Snack and lunch in a small back pack (preferably, not a school-sized bag) Water drink bottle
<b>SPECIAL REQUIREMENTS:</b>	
<b>SPECIAL MEDICAL REQUIREMENTS OF YOUR CHILD:</b>	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.
<b>PARENTAL ASSISTANCE REQUIRED:</b>	Parent volunteers must have already completed the Volunteer Training Program and hold a valid WWC check. Please cut off and return bottom slip by: <b>Monday 7<sup>th</sup> May 2018.</b> Volunteers will be notified by: <b>Monday 14<sup>th</sup> May 2018</b>
<b>NOTICE AND PAYMENT MUST BE RETURNED BY:</b> <i>Please note: payment will NOT be accepted after the due date.</i>	<b>THURSDAY 24<sup>th</sup> MAY 2018</b>

✂----- Please cut off and return bottom section to the school by the due date -----✂

I give permission for my child \_\_\_\_\_ of home group \_\_\_\_\_ to attend the excursion to Scienceworks.  
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: \_\_\_\_\_

Date \_\_\_\_\_ 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	Amount

Please charge my:  Bankcard  Visa  Mastercard Amount: \$ \_\_\_\_\_

Card Number \_\_\_\_\_

Expiry Date: \_\_\_\_ / \_\_\_\_ Name on Card: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_ Phone No. \_\_\_\_\_ Date: \_\_\_\_\_

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### **Parent assistance** (please complete if you are able to assist on the day) **Please return separately by: Monday 7<sup>th</sup> May, 2018.**

Adult’s name \_\_\_\_\_ Daytime contact phone no: \_\_\_\_\_

I am available to help with the Year 4 excursion on **Tuesday 29<sup>th</sup> May 2018**. 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.