



Kurmond Public School

Courtesy Safety Responsibility

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13th August 2019

Dear Parents

Years 5 & 6 Three-Day Canberra Excursion Wednesday 6th – Friday 8th November 2019

Years 5 & 6 will be participating in a three-day Canberra excursion from Wednesday 6th to Friday 8th November 2019 (Week 4 of Term 4).

The cost per student for the excursion is \$366 *and can be paid by instalments over the next few months*. A \$20 per student rebate from the Parliament and Civics Education Rebate scheme (PACER) has been deducted, as well as GST on transport, accommodation and entry fees. The PACER scheme is funded by the Federal Government.

To confirm your child's place on this excursion, please forward a deposit of \$66, together with the permission notes (see following page with *Itinerary* and *Packing Requirements* on reverse side) **and attached Medical Information sheet by Thursday 29th August**. The balance can be paid by four instalments of \$75 each by the dates indicated on the attached payment slips. These dates must be adhered to as the booking company requires immediate confirmation of numbers and full payment in advance.

Payments should be sent to school in a sealed and clearly marked envelope or ziplock bag, or you may make online payments using Visa or MasterCard credit or debit cards. Just go to the school website www.kurmond-p.schools.nsw.gov.au and click on 'Make a Payment' where the instructions are clearly explained. After completing the mandatory fields, i.e. those shown with *, tick the 'Excursion' box and enter 'Canberra'. Return the permission note/payment slip the next day with the online section completed.

If financial difficulties are being experienced, please contact Mrs Beggs or Mrs Ropa, to make other arrangements.

This excursion is an integral part of the curriculum for children in Years 5 & 6. It will complement the study of 'Civics and Citizenship/Democracy', which is studied in History.

Satisfactory student behaviour is expected at school and throughout the excursion in line with our School Discipline Policy. Students will need to maintain acceptable levels of effort and behaviour expectations in class and the playground. Class teachers, supervising teachers and the Principal will communicate any concerns or situations with students and parents.

Regards.

Julia Chia & Alison Vaccaro
Years 5 & 6 Teachers

Rhiannon Roberts
Relieving Principal

CANBERRA EXCURSION ITINERARY

Day 1

Arrive at school by 5.45am

Coach leaves school at 6.00am

Early lunch at Regatta Point (students bring own lunch Day 1)

National Capital Authority – Program ‘Reconciliation Place’

Royal Australian Mint – guided tour

Afternoon tea break outside Questacon

Questacon

Mt Ainslie scenic tour

Accommodation at Ibis Styles – settle in and R & R

Dinner

Supervised activities at accommodation

Day 2

Breakfast

National Arboretum – Program ‘Preserving our Forests’

CSIRO – Collections Forensics Program

Lunch on grass outside Old Parliament House (packs provided)

National Museum of Australia – Program ‘Meet the People’

Museum of Australian Democracy – ‘Who’s the Boss’

Electoral Education Centre & Rose Garden

Ibis Styles – short R & R

Dinner

National Botanical Gardens – Twilight Forest Adventure + supper (night activity)

Back to accommodation

Day 3

Breakfast

Parliament House (tour, education & hospitalities)

Lunch in picnic areas at front of Australian War Memorial (packs provided)

Australian War Memorial – ‘We Will Remember Them’ program and tour

Leave for home at 2.45 pm

Comfort/meal stop on way home *at own expense*

Approximate arrival at school at 7.30pm

...PTO for packing requirements

Please return by Thursday 22nd August

PERMISSION NOTE – CANBERRA EXCURSION

Wednesday 6th – Friday 8th November 2019

I give permission for my child _____ of Class _____ to attend the Canberra Excursion from Wednesday 6th – Friday 8th November 2019.

I understand the cost per student of the excursion is \$366. *I understand participation in this excursion is granted dependent on acceptable standards of behaviour.*

I enclose \$66 deposit I have paid \$66 online – Rec # _____

I enclose \$ _____ as additional payment (optional)

I have paid \$ _____ online as additional payment (optional) Rec # _____

Signed _____

Date _____

PACKING REQUIREMENTS

Students are to wear on Day 1:

- Casual clothes (e.g. shorts or jeans, T-shirts), hat and sports joggers

Students will need to bring:

- Healthy morning tea, afternoon tea, drinks and lunch for **Day 1**
- Casual clothes for **Day 2** (e.g. shorts or jeans, T-shirts), hat and sports joggers
- Full summer school uniform, including hat for Day 3. Students are to wear their sports joggers instead of school shoes.
- Refillable drink bottle
- Sunglasses & sunscreen
- A warm jacket or parka (for night activities)
- Underwear & socks x 2 days
- Pyjamas
- Toiletries
- Pen & paper
- Book/puzzles etc. for bus trip (**DO NOT BRING** mobile phones, iPads/iPods/electronic games or valuable items. **DO NOT BRING anything that you would not like to lose!**)
- Money for souvenirs & meal stop on way home (maximum of \$50). Students are to be responsible for their own money.

**PLEASE USE INSTALMENT SLIPS
PAYMENTS TO BE FINALISED BY THURSDAY 24/10/19**

Instalment #4

**CANBERRA EXCURSION
4TH INSTALMENT PAYMENT DUE BY THURSDAY 24TH OCTOBER**

I enclose \$_____ I have paid \$_____ online – Rec # _____
towards the cost of the above excursion for my child _____
of Class _____

Signed _____ Date _____



Instalment #3

**CANBERRA EXCURSION
3RD INSTALMENT PAYMENT DUE BY MONDAY 14TH OCTOBER**

I enclose \$_____ I have paid \$_____ online – Rec # _____
towards the cost of the above excursion for my child _____
of Class _____

Signed _____ Date _____



Instalment #2

**CANBERRA EXCURSION
2ND INSTALMENT PAYMENT DUE BY THURSDAY 19TH SEPTEMBER**

I enclose \$_____ I have paid \$_____ online – Rec # _____
towards the cost of the above excursion for my child _____
of Class _____

Signed _____ Date _____



Instalment #1

**CANBERRA EXCURSION
1ST INSTALMENT PAYMENT DUE BY THURSDAY 5TH SEPTEMBER**

I enclose \$_____ I have paid \$_____ online – Rec # _____
towards the cost of the above excursion for my child _____
of Class _____

Signed _____ Date _____

INFORMATION SHEET
(Return this form by Thursday 22nd August)
Years 5 & 6 Excursion to Canberra
Wednesday 6th – Friday 8th November 2019

NAME OF CHILD: _____
First Name Surname

AGE: Years _____ Date of Birth: ____/____/____

ADDRESS: _____

NAME OF PARENT OR GUARDIAN: _____
First Name Surname

CONTACT NUMBERS: Day _____ Evening _____

OTHER CONTACT PERSON: NAME: _____ PHONE NO: _____

DOCTOR CONTACT DETAILS: NAME: _____ PHONE NO: _____

MEDICAL INFORMATION

1. Does your child suffer from any of the following:

Asthma	Yes/No	Skin Conditions	Yes/No
Diabetes	Yes/No	Epilepsy, fits, blackouts	Yes/No
Sleep Walking	Yes/No	Allergic Conditions	Yes/No
Bed Wetting	Yes/No	Attention Deficit Disorder	Yes/No
Behavioural problems	Yes/No	Disability or chronic illness	Yes/No
A current illness	Yes/No	Other	Yes/No
Travel sickness	Yes/No (if yes, please provide medication)		

If yes, please provide full details and a suggested management guide (*attach sheet if necessary*)

2. Does your child require medication? Yes/No
 If yes, please complete the following:

Name of medication:	Dosage:	Times to be taken:	Reason/Condition
_____	_____	_____	_____
_____	_____	_____	_____

3. Does your child have any special needs or requirements, e.g. diet? Yes/No
 If yes, please provide full details (*attach sheet if necessary*) _____

4. Has your child had the Combined Diphtheria Tetanus Toxoid booster injection? Yes/No
 If given since 4 years of age, in what year was the most recent booster injection given? _____

It is your responsibility to provide all medication as originally packaged, comprehensive instructions and equipment for its administration and adequate supply for the duration of the excursion. Medication will be self-administered by the children, under direct supervision of staff at specified times.

YOUR MEDICARE NUMBER IS REQUIRED FOR YOUR CHILD TO RECEIVE IMMEDIATE MEDICAL ATTENTION IF NECESSARY

Medicare Number: _____

Private Insurance Health Fund: _____ Number: _____

Does this Health Fund cover ambulance fees? Yes/No

I consent to my child being given Panadol, if required, for pain relief while attending this excursion.

Signed _____

Date _____

Signature of Parent/Guardian