

Park Crawl – park/playground exploration

Dear parents and carers,

The following details relate to an excursion/activity that has been organised for your child. If you have any concerns about this excursion/activity, or related cost, please contact the principal on 61420077.

Name of Excursion/Activity	Park Crawl – park/playground exploration
Location	Various playgrounds and parks in Canberra
Purpose	This will be a vital springboard for learning as we investigate components of playgrounds and parks and then move into designing one ourselves!
Classes/Year Groups Participating & anticipated number of students	All year 1 and 2 children
Date	Friday 18 October 2019
Start Time	9:30 am
Finish Time	2:45 pm
Transport	Bus
Cost	\$20
Due Date	Tuesday, 15 October 2019 * Notes will not be accepted after this date
Teacher in Charge	Tania Blak
Additional educators:	Melissa Orton, Michael Smith, Melissa Mongan, Peter Simmons, Annette Watson, Tania Blak, 1 other LSA for first aid.
Intended ratio of educators and students:	1:10 – 7 staff
Additional Information including reason for excursion/links to Curriculum /proposed activities	This excursion complements a unit of inquiry about determining the best playground item to add to a park. Children will design their own playground item that could be added to existing playground. Children will share their designs with each other and vote on which items should be presented (in a letter) to the Transport Canberra and City Services (TAMS)

The ACT Education Directorate is an agency of the ACT Government (the Territory). The Territory has insurance arrangements in place in order to meet certain liabilities. The Territory meets claims (including claims resulting from school activities or excursions) against it where there is a legal liability to do so. Liability is not automatic and depends on the circumstances in which the injury or illness was sustained. Parents should obtain their own advice about private insurance protection that may assist in meeting expenses if their child is injured or suffers an illness in circumstances where there is no liability on the part of the Territory.

If the outside provider of the service or activity has requested that you sign a waiver or disclaimer statement, the ACT Education Directorate recommends that you consider carefully any risks involved before proceeding.

This excursion has had a risk assessment completed and submitted to the school principal and is available at the school.

Permission & Payment Note

Name of Excursion/Activity: **Park Crawl – park/playground exploration**

I give permission for my child _____ in class _____

to attend the above named excursion on Friday, 18 October 2019

Medical consent

I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment), in an emergency.

If there are any medical conditions that may affect your child on these excursions, please give details below.

Medical condition: _____

I have read the attached information regarding these excursions and understand what it contains.

Full Name of Parent/Carer (please print): _____

Contact details: _____

Signature of Parent/Carer _____ Date _____

Please return permission note and money to the front office or classroom teacher by Tuesday, 15 October 2019

***Please be aware of the following:** Staff accompanying students on excursions will take all reasonable care while students are in their charge to protect them from injury and to control and supervise their behaviour and activities. Parents should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour. Unacceptable behaviour will be treated as it is normally treated at school, (reminders, time out in a designated spot, and exclusion from an activity) but with the additional factor that the student may be asked to be collected or returned to school should the behaviour be extreme or overly persistent. Should this occur monies paid will not be reimbursed.*

This form requests information about students which will be held by the school. This information may be disclosed to government or private medical or para-medical staff and other relevant officers in the event of an accident or emergency. The information is collected as a lawful administrative function of the ACT Education and Training Directorate.

Please tick method of Payment

Quickweb Payment made on _____ (date) - This is a Westpac online payment option accessed through the school website that makes a payment direct to the school's bank account. Payments can be made using a Visa or Mastercard for any school event or contribution. Please use the below FEE CODE as your reference.

Direct Deposit Payment made on _____ (date) - Payment can be made by direct deposit to Latham Primary Management Account BSB: 032-777 Account No: 001527. Please use the below FEE CODE and Student Key as your reference. Student Key is usually the first 5 letters of the student's surname and the first letter of their first name.

Cash - Please secure Permission Note and money together. I have enclosed \$ _____

FEE CODE

PARK

LEDGER CODE – 8071-000-00

COST: \$20.00