



20 Wimmera Street Harrison ACT 2914 Email: info@harrison.act.edu.au www.harrison.act.edu.au Ph: (02) 6142 2200

## Kindergarten Questacon Excursion Monday 18 September 2023

Dear Parents and Carers,

This term in Kindergarten we are exploring the concept question: How do toys move? We will be going to Questacon to investigate and immerse ourselves in various scientific activities to help us answer this question.

What students need to bring: Drink bottle and a hat clearly labelled with their name

Date: Monday 18 September 2023

Time: Students will be departing school at 9:15am and returning to school at approximately 12:15pm

Transport: Chartered Bus

**Cost:** \$25.00 (Cost includes Bus and guided tour fee) The school has made every effort to keep cost for this excursion at a minimum level. If necessary, parents or students can confidentially discuss support to meet the cost of the excursion with the Principal. Please contact the front office if you would like to speak with the Principal.

**Notes and money to Harrison School front office by:** Friday 8 September 2023. Unfortunately, the School is unable to accept any notes after this date.

Excursion Risk Assessment: Available at the front office.

**Behavioural expectations**- Standards of behaviour based on the school's values apply in all camp and excursion situations. Students deemed to not be displaying appropriate behaviour on excursions or camps will be returned to school. No refund will be available under these circumstances.

Staff accompanying students on excursions will take all reasonable care while the 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.

Kind Regards, Maggie Hansen Kindergarten Teacher





in Class to attend the Kindergarten

20 Wimmera Street Harrison ACT 2914 Email: info@harrison.act.edu.au www.harrison.act.edu.au Ph: (02) 6142 2200

## Kindergarten Questacon Excursion Monday 18 September 2023 Permission Note

I give permission for my child \_\_\_\_\_\_ Questacon Excursion on **Monday 18 September 2023**.

Permission note to be completed and returned to Harrison School front office by: **Friday 8 September 2023** (Unfortunately, we are unable to accept notes after this date)

I agree to my child participating in the activities associated with this excursion. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this excursion.

I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.

The <u>Medical Information and consent</u> form\_only needs to be completed once/year prior to the first excursion unless there are changes to the details on this form. Are there any changes to this form?

Yes No

If yes, an updated *Medical Information and Consent Form* is required to be completed (available through the front office).

Will your child require medication to be administered during the excursion (e.g. allergy medication, pain relief)? Yes No

If yes, please complete a *Medication Authorisation and Administration Record* (available through the front office).

Is there any additional information you need to provide to support your child's participation in this excursion?

If yes, please provide these details

Please provide the following information:					
Medicare No:	Private Health Fund:		Membership No		
Ambulance Fund: Parents are responsible for ambulance costs outside the ACT.					
Name of Parent/C	Carer: (please print)				

Signature: \_\_\_\_\_ Date: \_\_\_\_\_





20 Wimmera Street Harrison ACT 2914 Email: info@harrison.act.edu.au www.harrison.act.edu.au Ph: (02) 6142 2200

## Kindergarten Questacon Excursion Monday 18 September 2023 Payment Contribution

	Student's Name: class:
	The cost of this event is \$25.00. I am paying the amount of \$ □ Cash
	□ Quickweb via the payment tab on our school website. <b>FEE CODE:</b> Questacon
	Credit Card –by completing your details below and returning to the school office
	Card No:
	Name on card ( <i>Please print</i> ):
	Signature:
r i c	you fill in this form, your personal information and that of your child will be collected and handled by the ACT Education Directorate (EDU) This information is eccessary for us to manage student participation in excursions and support the welfare and safety of your child. If you do not consent to supply us with this formation your child will be unable to participate in the excursion. Normally, we will not use or disclose this information for another purpose, without your onsent, unless you would reasonably expect us to use or disclose the information for a related purpose. Normally we only share information with school staff nd, where necessary, parents or volunteers assisting with the excursion to appropriately and effectively manage the excursion. The Directorate has a privacy
K	olicy that explains how we handle personal information, including how we handle privacy complaints. The policy is available on the Directorate's website

(<u>www.det.act.gov.au</u>) on the About Us page.