WILLIAM RUTHVEN
PRIMARY SCHOOL

Creating happy, curious and confident learners

__Excursion Notice –Year 3/4 WRPS__ ***- Darebin City Council 2018***

Dear Parents/Guardians,

An excursion for the Year 3/4 students has been arranged to Darebin City Council. The purpose of the excursion is for students to learn about the role of local government and the services they provide to the community, including local laws and transport. They will be travelling by bus.

Date: Wednesday, October 24th **Departure time:** 9:00am **Return time:** 1:00pm **Cost:** $8.50 or CSEF

Reminders for the day:

- Students must wear their complete school uniform.
- Students need to bring play-lunch and lunch with nude food encouraged. Any waste will be returned in students' lunch boxes. Drink bottles must filled with water. (No glass or cans please.)
- Students need to bring items in a small, light backpack.
- Please ensure all your child's belongings are named.

Please complete both attached **permission forms** and return to school by **Friday, October 19th.**

Staff attending: Tara Alexander-Bethke, Lauren Nanni, Erika Bennet.

✂

Year 3/4 EXCURSION TO: Darebin City Council **Date:** Wednesday, October 24th *Payment: $15 or CSEF*

Excursion Copy

Child's Name: ______________________________ **Grade:** ______________

I give permission for my child to attend the above excursion. In the event of illness or injury to my child whilst at school, on an excursion or traveling to or from school, I authorize a staff member in charge of my child, where it is impracticable to communicate with me, to consent to emergency medical arrangements on my behalf as are deemed necessary by a qualified medical practitioner.

Name: ____________________ **Signed** (Parent /guardian): ____________ **Date:** ________

My emergency mobile phone contact on the day is: ______________________________

>>>

Year 3/4 **EXCURSION TO:** Darebin City Council **Date:** Wednesday, October 24th

School Copy

Child's Name: ______________________________ **Grade:** ______________

I give permission for my child to attend the above excursion. In the event of illness or injury to my child whilst at school, on an excursion or traveling to or from school, I authorize a staff member in charge of my child, where it is impracticable to communicate with me, to consent to emergency medical arrangements on my behalf as are deemed necessary by a qualified medical practitioner.

Name: ____________________ **Signed** (Parent /guardian): ____________ **Date:** ________

My emergency mobile phone contact on the day is: ______________________________