



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.

22 August 2017

Koalas Excursion - National Botanic Gardens Excursion

The National Botanic gardens is a place where we can discover Australia's rich natural and cultural heritage. We are going to be budding botanists. We are going to get our hands dirty and find out what plants need to grow and live.

Destination: **National Botanic Gardens Excursion**

- Accompanying Staff:** Susie Tebb, Jayne Torley
- When:** Thursday 14th September
- Time:** 10am to 2.30pm
- Cost:** \$15.00
- Transport :** Bus
- Adult/child ratio:** 1/4

Expected number of children attending: 22
Expected number of Parents attending: 4

- In the event of requiring urgent contact with the educators during the excursion, please contact Theodore Primary School on 61423100
- A risk assessment has been completed for this excursion and is available at either preschool if requested.

Permission Note

I give permission for my childin classto attend **National Botanic Gardens** on **14 September 2017**.
Does your child have any medical condition that may affect him/her on this excursion?
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I have read the attached information regarding this excursion and understand what it contains.

FULL NAME OF PARENT / GUARDIAN SIGNATURE OF PARENT /GUARDIAN
.....

Phone contact of parent on day of excursion.

Excursion Payment Details

- Please find enclosed **\$ 15.00** to cover the cost of the excursion
- I have paid the excursion full year payment

Cash Credit Card Direct Debit

Please debit my credit card account No.

_____/_____/_____/_____ Expiry Date: ____/____/____

For the amount of _____ payable to Theodore Primary School

Name on Card: _____ Signature: _____

Direct Debit: School EFT Details: BSB -032777 Account No: 001834

Please include your **child's surname and name of excursion** in the reference field

