

22 April 2021

Dear Parents and Carers,

Stage 1 Excursion

Your child will be attending the following excursion:

Event:	Wollongong Science Centre
Date:	13 May 2021
Time	9.30am – 3.20pm
Location	Wollongong Science Centre
Travel	Bus
Cost	\$35 per student
Wear	<ul style="list-style-type: none"> • Sport uniform • Enclosed footwear • Sunscreen & Hat • Wet weather jacket
Bring	<ul style="list-style-type: none"> • Asthmatics must carry their inhaler. • Normal lunch and recess in a small carry bag • Morning Tea • A full drink bottle
Meeting point	COLA
Supervision	Mrs Hanegraaf, Mrs Butron, Mrs Lynch, Mrs Greening, Mrs Spowart, Ms Schmitz
Additional information	<p>Payment Advice: Please consider the following information before returning the attached permission note. The closing date for collection of permission notes and money for this excursion is Monday 10 May 2021. If the cost of this excursion will cause your family undue financial hardship, please contact Ms Holder in the office on 9520 0277 by 1 May 2021 to make alternate arrangements. Any enquires will be treated with the strictest confidence, but due to school payment systems, this date must be strictly adhered to.</p> <p>What not to bring: Students have been informed that electronic equipment including mobile phones, gaming consoles, etc. are not to be brought on the day. Items of value should be left at home to avoid breakages or loss during the excursion.</p> <p>Medication Requirements: Should your child require medication (including travel sickness tablets) to be administered during the excursion, please contact the school to enable appropriate procedures to be followed.</p>

Please return the attached note by Monday 10 May 2021 to the office payment box.

This excursion has the approval of the Principal.

Yours sincerely,

Alison Hanegraaf
Assistant Principal

Kyleigh Nash
Principal

**PERMISSION NOTE
Wollongong Science Centre**

I give permission for my child _____ of class _____ to attend
Wollongong Science Centre on Thursday 13 May 2021.

Should any medical emergency arise during the excursion, I give permission for teachers to seek medical assistance for my child.

I understand that payment must be received prior to the excursion in order for my child to attend. I understand that there is no refund available if my child is unable to attend on the day as the cost of the activity is calculated on the number of students enrolled.

I understand that travel will be by bus.

Additional needs that relate to my child participating in this activity (e.g. asthma, anaphylaxis, epilepsy):

I have made an online payment. My receipt number is: _____

I have enclosed \$35.00 cash

Parent/Carer signature

Date

