



COOLBINIA PRIMARY SCHOOL – *Inspiring Growth*

Bradford Street – Mt Lawley WA 6050
Telephone: (08) 9444 3798 – Fax: (08) 9444 5553
Email – Coolbinia.PS@det.wa.edu.au
ABN NO: 42 271 610 742

RE: Excursion

Dear Parents / Guardians,

As part of our Biological Science focus this term the students of Room 3, 4 and 5 will be going on an excursion to Caversham Wildlife Park. The students will travel to and from the excursion by bus. The overall cost includes travel and admission fares.

Excursion Details

Place: Caversham Wildlife Park

Date: Tuesday 29 May 2018

Time: 8:35am

Cost: \$16 per child

Teachers in Attendance: Mrs. Greer, Ms. Sampson and Mr. Owen

Requirements

Students are required to

- Wear their school uniform (Coolbinia T-Shirt with Black Shorts, Skirts or Track pants) which includes a broad brim hat and enclosed shoes.
- Please be mindful of the weather on the day, your child may need a jumper or a rain coat.
- Bring a packed recess, lunch and **two** water bottles. Drinking water is **not** available at Caversham Wildlife Park.
- Ensure valuables are left at home.

Please sign and return the permission slip below by **Monday 21 May 2018**.

Each classroom teacher requires four parent helpers for the day. If you are able to assist please contact your child's classroom teacher via email. If you have any further queries or questions please don't hesitate to contact us.

Kind Regards,

Erin Greer erin.greer@education.wa.edu.au

Sallie Sampson sallie.sampson@education.wa.edu.au

Chris Owen chris.owen@education.wa.edu.au

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EXCURSION PERMISSION SLIP – Caversham Wildlife Park

I have read and understood the above information regarding the excursion to Caversham Wildlife Park on Tuesday 29 May 2018.

I give my consent for _____ to attend and have enclosed \$16.

Please tick appropriate box regarding payment

At the office	<input type="checkbox"/>
Cash Enclosed within this form	<input type="checkbox"/>
Authority to deduct from account	<input type="checkbox"/>
By direct deposit	<input type="checkbox"/>

Where it is not practical to communicate with me, I authorise the teacher-in-charge of the excursion and consent to my child receiving such medical treatment as may be considered necessary. I am aware that the Department of Education has a Personal Accident Insurance Policy that covers children participating in authorised excursions and camps; however, this policy does not cover the loss or damage of personal belongings.

If there are any changes to your child’s Medical Information or Emergency contact details, which were provided at the beginning of the year, please advise your child’s class teacher prior to the excursion.

My best contact number on the day is _____

Signed (Parent/Guardian)

Date.....