

Curtin Primary School

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Year 3 Excursion to the National Museum of Australia

Dear Parents and Carers,

Students in year 3 have been learning about commemorations, celebrations and communities built around the concept of 'Identity'. At the National Museum of Australia students will participate in a program called A Living Culture in which students will handle and explore a range of Aboriginal and Torres Strait Islander objects to help them understand the ways in which Indigenous cultures have evolved and adapted in the last 200 years. Students will be focussing on discussing aspects of Aboriginal and Torres Strait Islander cultures including identity, diversity and spirituality. Please let your child's teacher know if you are available to assist us on the day. For safety reasons, it is advisable that younger siblings do not attend. Please note there is a fee for parking.

Details of the excursion are as follows:

Date:	Tuesday 21 st May 2019
Time:	11.00am – 3:00pm
Destination:	National Museum of Australia
	Lawson Crescent, Acton ACT
Cost:	\$20
	Payment is required prior to attendance at this excursion. If you are having difficulties meeting this deadline, please contact the school front office.
Travel:	By bus
Clothing:	School uniform (warm) with sensible walking shoes, sun-safe hat, sunscreen
Food arrangements:	Children need to bring a labelled water bottle and their lunch and recess (please do not arrange for a lunch order on this day).
Accompanying Teachers:	Alix Chu, Rachel Tibballs, Tanya Mowbray, Bre Macey, KM Janszen

NOTES AND MONEY NEED TO BE RETURNED BY: Friday 10th May

The coordinating teacher is Alix Chu. Contact with the group can be made **via Curtin Primary Front Office 6142 2570.** Inappropriate behaviour will be treated as it is normally treated at school, (thinking time at a designated place or exclusion from an activity). 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. Parents should also be aware that no automatic insurance is provided by the ACT Government in respect of injuries to students, non-enrolled children or yourselves should an injury occur on an excursion. You may wish to consider taking out personal insurance cover for yourself and/or for students and non-enrolled children accompanying the excursion.

Kind regards, Tanya Mowbray, Rachel Tibballs and Alix Chu Year 3 Teachers

PERMISSION SLIP (to be returned to school) Year 3 Excursion to the National Museum of Australia

- I have discussed with my child the need for sensible behaviour on this excursion.
- I authorise the teachers to take whatever action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group, or individually whilst on the 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 costs associated with any emergency arrangements made by the school. I agree to provide to the school any medical information relevant to this excursion. Ambulance transport is provided at no cost for the students in the ACT when it is needed while the student is involved in a school activity.
- I agree that my child will be under the authority of the school for the duration of the excursion.
- I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.
- I have read the attached information regarding this excursion and understand what it contains.
- I understand that individual records of contributions are confidential.

Signed(Parent/Guardian)

• I understand it will be not possible to refund any money if my child withdraws from an excursion.

I hereby give permission for my childof class to the National Museum of Australia. I give permission for my child to travel by	
returning at 3:00pm.	0
Payment Options:	
Name of Parent/Guardian:	
Signature of Parent/Guardian:	Date:
Contact phone numbers:	
PAYMENT IS CASH CHEQUE EFTPOS at Front	: Office
INTERNET TRANSFER Quickweb Code: 8021-000-00 Amount	Paid: \$20
BSB: 032 777 A/C NUMBER: 001199 (Reference: Student's surname a	nd initial)
ACT Department of Education and Training (This form is taken of MEDICAL INFORMATION FORM This form is intended to assist the school in case of any medical emergency with the student. All in clearly.	,
Student's name	Class
Parent's/guardian's full name	
Address	
Emergency contact numbers:(business hours)	
Other emergency contact. The following information is the augment modical requirements and/or other needs of my skild relations in the contact of the conta	
The following information is the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and/or other needs of my child relevant to the current medical requirements and the current medical requirements	ant to this excursion:
Consent to medical attention. In the case of an emergency, I authorise the school, where it is improved my child to receive such medical or surgical treatment as may be deemed necessary. I also under medical attention, ambulance transport and drugs while my child is on the camp/excursion/outdoor	ertake to pay costs which may be incurred for

Date