

Excursion Information for Parents: Dream Cricket Primary Diamond

Dear Parents and Carers,

The following details relate to an educational excursion to **Canberra Grammar School** which is being organised for all students in the Primary Diamond classes.

Dates: Friday, 15 November 2024 (Week 5, Term 4)

Time: Depart school at 9.20am – Return to school at 12.30pm

Purpose of excursion: This excursion allows students in the ACT with a disability to interact and connect through the medium of cricket.

Activities: Play cricket, interact with peers

Clothing and Equipment: Sun smart hat, water bottle, sunscreen, recess and lunch

Transport: Students will travel by charter bus

Group Size: 22 students

Teacher in Charge: Matthew Garratt

Additional Adults: Robin Neideck, Nicola Clifford, Karen Walsh

Cost: No Cost

Permission Note to Amaroo School front office by: Friday, 1 November 2024

Excursion Risk Assessment: Available at the front office

Contingency: If there is poor weather on the day, the event may be postponed or cancelled.

Behavioural expectations: Students are expected to demonstrate our school PBL Behaviour Expectations of being a Safe, Respectful and Responsible Learner at all times.

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.

Kind Regards,

Matthew Garratt
Executive Teacher

Excursion Permission Note for Parents: Dream Cricket

I give permission for my child _____ (full name) in year _____ to attend the Amaroo School excursion to **Canberra Grammar School on Friday, 15 November 2024**, travelling by charter bus and other details as outlined in the Excursion Information for Parents (including contingency plans).

I agree to my child participating in the activities associated with this excursion mentioned previously. I have discussed with my child the need for expected behaviour on this 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 associated costs. I have provided to the school all medical information relevant to my child attending this excursion.

I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.

The Medical Information and Consent Form only needs to be completed once/year prior to the first excursion unless there are changes to the details on this form. Are there any changes to this form?

Yes No

If yes, an updated *Medical Information and Consent Form* is required to be completed (available through the front office).

Will your child require medication to be administered during the excursion (e.g. allergy medication, pain relief)?

Yes No

If yes, please complete a *Medication Authorisation and Administration Record* (available through the front office).

Is there any additional information you need to provide to support your child's participation in this excursion?

Yes No

If yes, please provide these details

Please provide the following information:

Medicare No (please include the Reference No. next to your child's name)	Private Health Fund:	Membership No
Ambulance Fund: Parents are responsible for ambulance costs outside the ACT.		

Name of Parent/Carer: (please print) _____

Contact Number: _____

Signature: _____ Date: _____