



# Tuart Hill Primary School

Independent Public School

Banksia St Tuart Hill WA 6060

Ph: 9413 1500

Email: TuartHill.PS@education.wa.edu.au

*Creating Bright Futures*

## Parent Information – School Excursion

*To be retained by parent/guardian*

<b>VENUE/ LOCATION:</b>	Servite College Pool (formerly Tuart College Swimming Pool) French Street, Tuart Hill
<b>REASON FOR SCHOOL EXCURSION:</b>	Faction Swimming Carnival
<b>ACTIVITIES TO BE CONDUCTED:</b>	25m races, relays and novelty games
<b>DATE(S):</b>	13 <sup>th</sup> March, 2020
<b>TIME:</b>	8.40am-1pm
<b>COST:</b>	\$2.20 entry per student
<b>STUDENTS WILL NEED TO WEAR/BRING:</b>	Children will need to wear to school - bathers, rash vest, towel, goggles (optional), sunscreen, appropriate footwear (thongs allowed for this event only), red school hat.  Children will need to bring to school to change into – red t shirt, black shorts/skirt/skort and appropriate enclosed footwear
<b>NAMES OF ADULTS ATTENDING:</b>	All Year 4-6 classroom teachers, Mrs Innes, Mrs Bell and Mrs Connolly
<b>SPECIAL CONDITIONS:</b>	If there is a lightning storm the carnival will be cancelled and not rescheduled. Parents and volunteers are not allowed to take photos of students unless it is of their own child as permission from individual parents has not been given.

### Student contact arrangements during the School Excursion

Parent to ring school: 9413 1500

Supervision to be provided by: Tuart Hill Primary School Staff

### Staff action in case of accident or illness during the School Excursion

Follow the Tuart Hill Primary School's Emergency Plan

**Note:** I am aware that the school and its employees are not responsible for personal injuries or property damage which may occur during a school excursion, unless the school or its employees are proven to be negligent.

**Payment Options:** 1. Please debit the cost of this excursion from my Student/s' account/s

2. Cash – correct amounts must be tendered as change cannot be provided ☐ ☐

3. EFTPOS – now available – please see Front Office Staff who can assist you make a payment via EFTPOS using a debit or credit card. ☐

4. Bank transfer – to make direct deposit payments to the school, please use these account details: ☐

**Bank:** Westpac Banking Corporation

**Account Name:** Tuart Hill Primary School

**BSB:** 036-053

**Account:** 920 622

**Reference:** Child's Surname / Room No / Code

**E:** Excursion **I:** In-school Activity **C:** Contributions **P:** PEAC **M:** IMSS

**Example:** Smith 9 E

Families who may experience difficulty in meeting this or any school-based cost are encouraged to have a confidential conversation with the Manager of Corporate Services, Mrs Vera Hick, [vera.hick@education.wa.edu.au](mailto:vera.hick@education.wa.edu.au) to discuss options.



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### Consent Form - School Excursion

**CONSENT FORM FOR FACTION SWIMMING CARNIVAL EXCURSION TO BE RETURNED SIGNED TO THE FRONT OFFICE**

**PAYMENT METHOD:** Debit Student Account ☐ Cash ☐ EFTPOS ☐ Bank Transfer ☐ (please indicate how you have paid)

**THE STUDENTS WILL BE WALKING TO SERVITE POOL WITH THEIR CLASSROOM TEACHER.**

I am aware that the school and its employees are not responsible for personal injuries or property damage which may occur on an excursion, unless the school or its employees are proven to be negligent.

I agree to inform the organisers well before the scheduled excursion departure of any change to my child's health and fitness so that appropriate supervision may be arranged.

I give permission for my son/daughter to receive medical treatment in case of emergency.

I am also aware that the Department of Education WA insurance doesn't cover personal accidents through misadventure nor loss or damage of personal belongings.

### **CONTACT INFORMATION**

Home:	Work:	Mobile:
Year Level:		Room:
<p>I have read and understood the information regarding the Faction Swimming Carnival excursion on Friday 13<sup>th</sup> March and <b>GIVE</b> consent for my son/daughter: _____ to attend this activity.</p>		
<p><b>Signature of parent/guardian:</b> _____ <b>Date</b> _____</p>		

The following details have changed from those recorded on my child's medical information form.

- \_\_\_\_\_
- \_\_\_\_\_