

2 Bielski Street, Denman Prospect, ACT 2611

Phone: 02 6142 3491

Email: evelynscottschool.information@ed.act.edu.au

Ridgeline Park Reward

DESCRIPTION:

As part of our whole school Positive Behaviour for Learning (PBL) focus, learners in 5/6 are celebrating reaching their 'Being a respectful and Safe learner' goal by walking to Ridgeline Park to have lunch and play at the playground as a reward. Learners in 5/6 will walk together as a group to the park with supervision.

DATE:	Wednesday 20th September 2023 (Term 3, Week 10)
VENUE:	Ridgeline Park - Temple Tce, Denman Prospect
TRAVEL ARRANGEMENTS:	Students will walk to and from the venue with staff supervision
DEPARTURE & RETURN TIMES:	We will depart Evelyn Scott School at 11:30 , returning at approximately 1pm
COST:	There is no cost associated with this activity
CLASSES ATTENDING:	All learners in 5/6
STAFF ATTENDING:	Kate Gillard, Jane Phippen, Michael Tinio
WHAT TO BRING:	Students should bring: lunch, Full water bottles, Hats and shoes suitable for walking
NOTES DUE BY:	Please return all notes by Monday 18 September 2023

Code of Conduct and Parental Agreements:

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. Unacceptable behaviour will be treated as it is normally treated at school, (reminders, time out in a designated spot, and exclusion from an activity) but with the additional factor that the student may be returned to school should the behaviour be extreme or overly persistent.

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,

5/6 Team



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STUDENT NAME:	CLASS:
I hereby consent to my child attending the Ridgeline Park Re Please check the appropriate boxes:	eward excursion.
\Box I have read and understand the attached information page for the $oldsymbol{q}$	event and I consent to the travel arrangements.
☐ I agree to my child participating in the activities associated with the I have discussed with my child the need for expected behaviour on the arrangements for the welfare of my child (including medical or surgical the associated costs. I have provided to the school all medical inform excursion	is excursion. I authorise the school to make al treatment) in an emergency and I agree to meet
☐ The Medical Information and Consent form only needs to be compuness there are changes to the details on this form. Are there any changes to the details on this form.	
If yes, an updated Medical Information and Consent Form is required hard copy from the front office).	to be completed (available via the above link or
$\hfill \square$ Will your child require medication to be administered during the eYes / No	excursion (e.g. allergy medication, pain relief)?
If yes, please complete a <u>Medication Authorisation and Administration</u>	n Record
$\hfill \square$ Is there any additional information you need to provide to support Yes / No	t your child's participation in this activity?
PARENT NAME:	_ SIGNATURE:
DATE: CONTACT PHONE NUMBER:	