



Evelyn  
Scott  
School

2 Bielski Street, Denman Prospect, ACT 2611

Phone: 02 6142 3491

Email: [evelynscottschool.information@ed.act.edu.au](mailto:evelynscottschool.information@ed.act.edu.au)

## MUSICA VIVA PERFORMANCE INCURSION

### DESCRIPTION:

Musica Viva Australia will be bringing an exciting concert presentation to Evelyn Scott learners featuring The Phoenix Collective Quartet, a professional String Quartet who will present a live performance of **Game On**, a concert that explores what it means to work together to accomplish goals, and how teamwork really does make the dream work in music, athletics, and in life.

<b>DATE:</b>	Thursday, May 16, 2024 (Term 2, Week 3)
<b>VENUE:</b>	Evelyn Scott School Gymnasium
<b>COST:</b>	Cost is \$11 per student
<b>CLASSES ATTENDING:</b>	Learners in Years 1-6
<b>STAFF ATTENDING:</b>	Mary-Ellen Fimbel, Dean Pilton, Year 1-6 classroom teachers
<b>NOTE &amp; PAYMENT DUE BY:</b>	Please return all notes and payment by Friday 10 May 2024 - Term 2, Week 2

### 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 class or the front office 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,

Mary-Ellen Fimbel

[Mary-Ellen.Fimbel@ed.act.edu.au](mailto:Mary-Ellen.Fimbel@ed.act.edu.au)



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## Game On: Musica Viva Australia

STUDENT NAME: \_\_\_\_\_ CLASS: \_\_\_\_\_

I hereby consent to my child attending the above Evelyn Scott School Incursion.

Please check the appropriate boxes:

- I have read and understand the attached information page for the incursion and I consent to the payment and activity arrangements.
- I agree to my child participating in the activities associated with this incursion mentioned previously. I have discussed with my child the need for expected behaviour on this incursion. 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

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

\_\_\_\_\_  
PARENT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ CONTACT PHONE NUMBER: \_\_\_\_\_

### PAYMENT OPTIONS

AMOUNT: \$11

- Pay via QuickWeb: <https://www.evelynscottschool.act.edu.au/Payment>  
If paying via QuickWeb, please include the cost code: **MUSICA VIVA** as a reference
- Pay over the phone or in person by Credit Card/EFTPOS by calling the front office on 6142 3491

Office Staff to complete:

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Payment made via: \_\_\_\_\_ Entered on SAS: