



Evelyn
Scott
School

2 Bielski Street, Denman Prospect, ACT 2611

Phone: 02 6142 3491

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

Kindergarten National Zoo and Aquarium Excursion

DESCRIPTION:

Kindergarten learners will be visiting the National Zoo and Aquarium as part of our Global Concept: One World. Our Essential Question in Kindergarten is: 'What do living things need to survive?' and to support this, we will be participating in a workshop at the zoo, entitled 'Is it Alive?'. Learners will explore the characteristics, needs and uses of living things by inquiring about their noticeable features of the living things they observe at the zoo.

DATE:	Friday, 22nd September 2023. (Week 10, Term 3)
VENUE:	National Zoo and Aquarium 999 Lady Denman Dr, Yarralumla ACT 2611
TRAVEL ARRANGEMENTS:	Learners will travel to and from the venue by charter bus
DEPARTURE & RETURN TIMES:	We will be departing school at 9:15am. Please arrive at school <u>no later than 9:00 am</u> on this day so we can mark the roll and board the bus in time to depart. We will be returning at approximately 2:15pm
COST:	\$34 (includes zoo entry and bus travel)
CLASSES ATTENDING:	All Kindergarten learners
STAFF ATTENDING:	Kindergarten Teachers and Learning Support Assistants
WHAT TO BRING:	Sun Safe hat, Lunch and water bottle Weather appropriate school clothing
NOTE & PAYMENT DUE BY:	Please return all notes and payment by Monday 18th September We are unable to accept notes or payments returned after this date. <i>**Please note, students will be unable to attend the excursion without signed parent/carer permission.</i>

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,

Karice Ward karice.ward@ed.act.edu.au Ellen Christou ellen.christou@ed.act.edu.au

Anna Hammond anna.hammond@ed.act.edu.au Tina McCarthy tina.mccarthy@ed.act.edu.au



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STUDENT NAME: _____ CLASS: _____

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

Please check the appropriate boxes:

☐ I have read and understand the attached information page for the event/excursion and I consent to the payment and travel arrangements.

☐ 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

☐ 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:

- Pay via QuickWeb: <https://www.evelynscottschool.act.edu.au/Payment>
If paying via QuickWeb, please include the cost code: **Nat Zoo & Aquarium** 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: ☐