



Evelyn
Scott
School

2 Bielski Street, Denman Prospect, ACT 2611

Phone: 02 6142 3491

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

Senior School End of Year Celebration Movie Day

DESCRIPTION:

Having successfully completed our inaugural year, Evelyn Scott School Senior Campus Learners are being invited to attend a movie day excursion, screening at Hoyts Belconnen. As well as an opportunity to celebrate the end of the year together, this is a recognition of our learners helping to establish our School's Positive Behaviour for Learning expectations. The movie title will be confirmed closer to the date and will be communicated to families beforehand.

DATE:	Wednesday 13th December, 2023 (Week 10, Term 4)
VENUE:	Hoyts Belconnen, Benjamin Way, Belconnen ACT 2617
TRAVEL ARRANGEMENTS:	Students will travel by charter bus to and from the venue
DEPARTURE & RETURN TIMES:	The bus will depart Evelyn Scott School at approximately 11:30am and return to school at approximately 2:50pm
COST:	\$20 - Cost includes bus travel, movie ticket and popcorn
CLASSES ATTENDING:	Senior Campus Learners from Years 7, 8 and 9
STAFF ATTENDING:	All Senior School Staff
WHAT TO BRING:	Students should bring: water bottle, lunch and wear school uniform
NOTE & PAYMENT DUE BY:	Please return all notes and payment by Friday 1st December, 2023 We are unable to accept notes or payments returned after this date. <i>**Please note, learners will be unable to attend the excursion without signed parent/carer permission and payment.</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,

Ross Dennis, ross.dennis@ed.act.edu.au



Evelyn
Scott
School

2 Bielski Street, Denman Prospect, ACT 2611

Phone: 02 6142 3491

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

Senior School End of Year Celebration Movie Day

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: \$20

- Pay via QuickWeb: <https://www.evelynscottschool.act.edu.au/Payment>

If paying via QuickWeb, please include the cost code: **EOY MOVIE** 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: ☐