



WEST LEEDERVILLE
PRIMARY

Dear Parents,

I am pleased to provide you with the following details regarding our excursion to the Town of Cambridge Arbor Day activities at Lake Monger on Friday, June 7th, 2019.

This excursion has been planned to supplement the HASS learning program in your son's/daughter's classroom.

Please retain this information and return the consent form (opposite) by Wednesday, 29th May, 2019.

VENUE: Lake Monger Reserve

DATES: Friday, June 7th, 2019

TIME: 9am to 12pm

TRANSPORT: Bus (provided by Town of Cambridge)

COST: Nil

DRESS: Blue school uniform, hat & wet weather gear if indicated.

SUPERVISION: Ms Pip Hawson & volunteer parents

NOTE:
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. Parents/guardians 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. Costs incurred as a result of accident or illness are the responsibility of the parent/ guardian.
Parents are required to inform the organisers well before the scheduled excursion departure of any change to their child's health and fitness so that appropriate supervision may be arranged. Where it is considered necessary, school staff will arrange medical assessment and treatment for students.

Pip Hawson
Year 3 White teacher

Fiona Kelly
Principal

ARBOR DAY PAYMENT METHOD
Students from Year 3 White- \$0 per student

Child's name: _____ Teacher: _____

Please:-

- Debit my child's school based account. (PLEASE ENSURE SUFFICIENT FUNDS).
- I have paid by Direct Bank Deposit (BSB:036 044 Acct. No:123672
Ref:Student's name) Bank reference no: _____ Date: _____
- I enclose \$ _____ (Please bring cash directly to the office. No change will be given. A credit will appear on your statement).
- Credit card: Type _____ Card No. _____
Expiry date _____ Amount _____
Signature: _____ Date: _____

(Credit Card payments only accepted where cost exceeds \$15)

ARBOR DAY CONSENT FORM 2019

I have read and understood the information regarding the Town of Cambridge Arbor Day activities at Lake Monger on Friday, June 7th, 2019 and give my consent

for _____ (name) to attend.

Signature of parent/guardian _____ Date _____

RETURN TO CLASSROOM TEACHER BY Wednesday, 29th May, 2019