



Dear Parent/Guardian,

I am pleased to provide you with the following details regarding our incursion to:

Slithers and Slides on Tuesday 21st May, 2019.

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

Please retain this information and return the consent form (opposite) by Monday 13th May, 2019.

VENUE: Kindergarten class

DATE: Tuesday 21st May, 2019

TIME: Kindergarten Blue 10.30 am – 11.30 am
Kindergarten Red 11.30 am – 12.30 pm

TRANSPORT: Nil

COST: \$9.00

DRESS: Kindergarten Uniform

ITEMS REQUIRED: Nil

SUPERVISION: Classroom Teachers and Education Assistants

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 illnesses 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. Should you have any queries, please do not hesitate to contact me/ the teacher in charge of the excursion on 9381 1655 or via email.

Gail Collet and Sue Wilson
Classroom teacher/s:

Fiona Kelly
Principal

SLITHERS AND SLIDES PAYMENT METHOD Students from Kindergarten Blue/Red - \$9.00 per student

Child's name: _____ Teacher: _____

My child will be participating in the Slithers and Slides on 21st May, 2019 for the cost of \$9.00.

Please:-

Debit my child's school based account. (PLEASE ENSURE SUFFICIENT FUNDS).

The following options are available to top up your student based account. We recommend a deposit of \$100.

Direct bank deposit

Visa payment

Cash / Eftpos

BSB: 036 044
Account No: 123672
(use child's name & unallocated as reference).

Telephone 9381 1655 or call in at the office.

Direct deposit and Credit Card payment is not available for costs under \$20.

I enclose \$_____ (Please bring cash directly to the office. No change will be given. A credit will appear on your statement).

SLITHERS AND SLIDES INCURSION CONSENT FORM (Kindy Red/Blue))

I have read and understood the information regarding the Slithers and Slides incursion on 21st May, 2019 and give my consent for my son/daughter to attend.

Yes I am able to help: _____

Signature of parent/guardian _____ Date _____

RETURN TO CLASSROOM TEACHER BY MONDAY 13th MAY, 2019