



MAJURA PRIMARY SCHOOL

Knox Street, Watson ACT 2602

Phone (02) 6142 3140
admin@majuraps.act.edu.au www.majuraps.act.edu.au



PARENT CONSENT FORM

VENUE AND PURPOSE

To support our Inquiry unit into Rules and Laws this excursion will enable students to experience the debating processes associated with government and making of laws. The students will visit the Museum of Australian Democracy at the Old Parliament House where they will be introduced and participate in the debate about the Franklin River.

DATE OF DEPARTURE

29th March 2019

TIME OF DEPARTURE

9.30am

DATE OF RETURN

29th March 2019

TIME OF RETURN

12.30pm

CLASSES INVOLVED

All year 4 classes

TEACHER IN CHARGE

Gareth Rowe

PARTICIPATING STAFF

Susanne Armistead, Emma Marsh, Maureen
Moffatt and Andrew Xirakis

MODE OF TRANSPORT

Bus

COST PER STUDENT

\$9.50

Note: Excursions are an optional enrichment activity and parents are expected to cover the cost incurred.

EMERGENCY PHONE

(02) 6142 3140

ADDITIONAL INFORMATION

Students will attend in full uniform and will need to have a SunSmart hat and their recess. They will return to school in time for lunch.

Teacher in Charge Name

Gareth Rowe

Daniel Zobel

Principal

Please fill in the attached form and return it with payment to the front office by:

Notes will not be accepted after this date.

Wednesday

27 March



MAJURA PRIMARY SCHOOL

Knox Street, Watson ACT 2602



Phone (02) 6142 3140
admin@majuraps.act.edu.au www.majuraps.act.edu.au

PLEASE RETURN TO THE FRONT OFFICE BY 27 March 2019

Child's Name _____ Class Teacher _____

I consent to my child attending Museum of Australian Democracy

Please tick the appropriate boxes:

I have enclosed \$9.50 in full payment.

Quickweb Reference
MoAD

Direct Debit
BSB: 032 777
Account Number: 001594
Reference: Surname/MoAD

EFT at Office

Cash

I authorise for the teacher in charge to make arrangements for the welfare of my child (including medical) in an emergency

I agree to meet the costs associated with an emergency arrangement made by the teacher in charge – fee of ambulance transportation (free within the ACT).

I agree that the student will be under the authority of the school for the duration of the excursion, and that the teacher in charge is authorised to return the student home at the expense of the parent/guardian if the teacher in charge considers that circumstances warrant such action.

I agree to the student travelling by private car, driven by a staff member, if applicable.

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 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.

The school has made every effort to keep costs for this activity at a reasonable level. If you require financial assistance please make an appointment to speak to the Principal.

I have read the attached information regarding this excursion and understand what it contains.

Full name of parent/carer: _____ (please print)

Signature of parent/carer: _____ Date: ____/____/____

Contact Numbers: (h) _____ (w) _____ (m) _____