



No cost

EXCURSION INFORMATION FOR PARENTS

Dear Parents and Carers,

The following details relate to an educational excursion to Cluster Celebration

Dates: Thursday 20 October 2022

Time: 9:30am to 2:30pm

Cost: Nil

Purpose of excursion: To participate in festivities with some Inner North Canberra schools and to coordinate an activity as part of these festivities.

Activities: A variety of culturally diverse experiences

Clothing and Equipment: School uniform including hat and walking shoes, bag with lunch and water bottle. All to be clearly labelled with your child's name

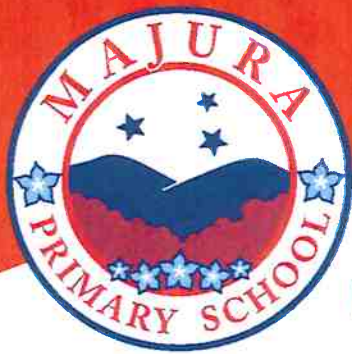
Transport: Bus

Group Size: 32

Trip Leader: Kathryn Shaw

Teacher and Co Educators: Katie Kanowski, Mel Loughton, Sue Hurkett

Excursion Risk Assessment: Available at the front office



No cost

Excursion Permission Note

I give permission for my child _____ to attend the Majura Primary excursion to Cluster Celebration at Corroboree Park on Thursday 20th October 2022 travelling by Bus. This is an annual event where the students will be joining other students from across the Inner North of Canberra (primary, secondary and college) to participate. Each school will be taking responsibility to coordinate an activity, contributing to the day's festivities. Majura Primary School's Aboriginal and Torres Strait Islander students, along with one friend each have been invited to attend. If it is raining the event will be held at Dickson College.

Families are most welcome to join us at the park for all or part of the day

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.

I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.

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

If yes, please provide these details

Please provide the following information:

Medicare No:		Private Health Fund:		Membership No	
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Name of Parent/Carer: (please print) _____

Signature: _____ Date: _____