



# LYNEHAM PRIMARY SCHOOL

## Excursion Information for Parents

Dear Parents and Carers,

The following details relate to an educational excursion to Hoyts Cinemas which is being organised for Year 6 students as part of the Health and Wellbeing unit.

**Dates/time:** Friday 5<sup>th</sup> July at 9:30am returning to school 12:30pm

**Purpose of excursion:** Year 6 Health/Wellbeing Learning Excursion

**Activities:** Students will be attending Hoyts Cinemas to watch Inside Out 2 as part of their Health and Wellbeing curriculum outcomes.

**Clothing and Equipment:** School uniform, comfortable shoes

**Transport:** Bus

**Group Size:** 75 Year 6 students

**Trip Leader:** Emma Harriden

**Assistant Leaders:** Em Streeter, Elise Sutherland

**Cost:** \$30 includes bus, movie ticket, popcorn and water.

*The school has made every effort to keep cost for this excursion at a minimum level. If necessary, parents or students can confidentially discuss support to meet the cost of the excursion with the Front Office.*

**Notes to Lyneham Primary front office by: Wednesday 26<sup>th</sup> June**

**Excursion Risk Assessment:** Available at the front office

**Contingency:** If staffing is impacted the excursion will be postponed.

**Behavioural expectations-** At Lyneham PS, we are safe, respectful learners. Students who are unsafe or disrespectful will be given reminders. Guardians or parents may be called to pick their student up in the event where the student continues to be unsafe or disrespectful.

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.

Kind Regards,

Merryn O'Dea  
Principal

## Year 6 Wellbeing Permission

I give permission for my child \_\_\_\_\_ to attend the Lyneham Primary School excursion to **Hoyts Cinemas on Friday 5<sup>th</sup> July** travelling by bus and other details as outlined in the Excursion Information for Parents (including contingency plans).

*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

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Name of Parent/Carer: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Payment Slip \$30

I am paying the amount of \$ \_\_\_\_\_ Student Name: \_\_\_\_\_

Credit Card – at front office, by telephone to the front office, via the payment tab on our school website or by completing your details below and returning to the front office

Card No: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name on card (*Please print*): \_\_\_\_\_ Signature: \_\_\_\_\_

Cash at the school office

Parent Portal

If you fill in this form, your personal information and that of your child will be collected and handled by the ACT Education Directorate (EDU) This information is necessary for us to manage student participation in excursions and support the welfare and safety of your child. If you do not consent to supply us with this information your child will be unable to participate in the excursion. Normally, we will not use or disclose this information for another purpose, without your consent, unless you would reasonably expect us to use or disclose the information for a related purpose. Normally we only share information with school staff and, where necessary, parents or volunteers assisting with the excursion to appropriately and effectively manage the excursion. The Directorate has a privacy policy that explains how we handle personal information, including how we handle privacy complaints. The policy is available on the Directorate's website ([www.det.act.gov.au](http://www.det.act.gov.au)) on the About Us page.