



ACT
Government

Education and Training

Torrens Primary School

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An ACT Government School



July 2017

YEAR 6 SYDNEY TRIP 2017

EXCURSION: Year 6 Sydney Trip

YEAR LEVEL: Year 6

DATE OF EXCURSION: Wednesday 6th September – Friday 8th September 2016

TIME: 7am for a 7.15am departure from Torrens Primary School front gate

TRANSPORT: Cooma Coaches, an accredited coach line service. **Please note that the departure time on Wednesday the 6th is 7.15am. Arrival back at Torrens on Friday 8th September is around 6:30 - 7pm.** Staff will contact the School with any changes to times if necessary. Students will not be permitted to leave the school on their own. Parents **must** collect students from the school.

COST: \$330 (can be made in instalments up until the due date)

PAYMENT DUE: 3.30pm Friday 25th August 2017

PAYMENT OPTIONS: Payment link – www.torrensp.s.act.edu.au: Eftpos; Cash; Cheque (Torrens Primary School)

This is an optional activity but enriches the school life of the child. Payment is required to cover the cost of your child attending this excursion. The school has made every effort to keep costs for this activity at a reasonable level.

Clothing:

School uniform is to be worn on the bus to Sydney and for Thursday and Friday. Free clothes may be taken to wear while relaxing at the accommodation venue.

Pack **wet weather gear**.

Food:

Morning Tea, lunch and afternoon tea is required on the first day. Please pack in a small backpack that can be carried as hand luggage on the bus each day. All other food is provided by our YMCA accommodation. **Please bring a drink bottle for use each day.**

Sleeping gear:

Students will need to bring a sleeping bag and pillow case with them. A pillow and blanket are provided by the YMCA.

Valuables:

Cameras, iPods, money etc. may be taken but are the sole responsibility of each student.

Spending Money:

Students will require some money for dinner on Friday evening. They may also bring some money for the purchasing of souvenirs; this decision is left to individual families.

Travel Sickness:

Please advise us and supply medication where necessary. Please also include medication for return journey and around Sydney if necessary. Please note we cannot supply travel sickness medication if your child feels they may need it. Please ensure they have some with them.

Special diet/Medication:

Should your child need a special diet or to take medication, please inform both the Torrens teachers **in writing before the excursion.** Any known problems such as sleepwalking, bedwetting etc. should be mentioned. All medications are to be clearly labelled with the child's name, dosage and time to be taken and given to the First Aid Officer (Mr Pickering) prior to leaving on Wednesday morning (at least the day before is preferable).

Contacts:

Please ensure your child knows your daytime contact numbers and has them written down and readily available.

Medical forms and phone numbers will be carried by the accompanying staff. Students with personal phones will be able to contact families at certain times but will not be available to make or receive calls during school hours.

Accompanying Teachers:

Danielle Geeves, Louise Zeitlhofer and Greg Pickering.

Payment:

The total cost of the excursion including bus travel, accommodation, food and admission into the various venues is \$330.

Payment is due by COB Friday 25th August.

Please complete the following forms and return them to your child's teacher:

1. Permission note

2. Medical Form

3. Payment slip with appropriate money (cheques payable to Torrens Primary School); alternatively use the credit card facilities provided or online payment. Payment may be made in instalments. The school has made every effort to keep costs at a reasonable level.

We would appreciate it if all documentation could be completed and returned ASAP. Payment may be delayed until the due date or in instalments if you wish, but getting the paperwork finalised early would be helpful. Outstanding payment or paperwork will result in non attendance.

The activities associated with this excursion are optional but enrich the school life of the child. Payment is required to cover costs. The school has made every effort to keep costs for this excursion at a reasonable level. If there is insufficient total funding available to meet the cost of the excursion, regrettably we may not be able to proceed.

If there are any problems please contact Mrs Geeves.

FULL PAYMENT IS DUE BY COB Friday 25th August.

Danielle Geeves & Greg Pickering

PROGRAM FOR THE THREE DAYS

DAY 1: WEDNESDAY 6th September: BUS DEPARTS TORRENS FOR SYDNEY AT 7.15AM

*** Morning Tea/Lunch/Afternoon Tea provided by families.**

Morning Tea at Berrima at 9:30 - 10am

Arrive at Quarantine Station 'Ghost Boy Tour' extended version at 12:30pm

Lunch at Quarantine Station before commencing program

Check in to YMCA Accommodation approximately 4:30pm

Dinner provided by YMCA.

Movie night

DAY 2: THURSDAY 7th September: BUS DEPARTS YMCA ACCOMMODATION AT 9AM

***Breakfast/Morning Tea/Lunch/Afternoon Tea provided by YMCA.**

Harbour Bridge Pylon Tour at 10.15am

Maritime Museum Tour at 12.30pm

Return to YMCA accommodation approximately 3:00pm

Dinner provided by YMCA.

Games Night

DAY 3: FRIDAY 8th September: BUS DEPARTS YMCA ACCOMMODATION AT 8.30AM

*** Breakfast/Morning Tea/Lunch/Afternoon Tea provided by YMCA.**

Australian Museum William St 'Surviving Australia' exhibition at 10.30am

Lunch in Centennial Park under the Federation Dome

Leave Sydney approx. 2.00pm

Early dinner at Sutton Forest McDonalds (**money required**)

Arrive at Torrens Primary approx. 6:30 - 7pm

***Children are expected to be on exemplary behaviour throughout the trip and stay with their group at all times. Parents will be contacted to collect any student who cannot follow these procedures.**

School uniform must be worn at all times.

Emergency Contact: TPS mobile carried by Mrs Geeves - number will be sent out prior to the excursion.

PERMISSION NOTE & MEDICAL NOTE
YEAR 6 SYDNEY TRIP 2017

Return to front office:

**PLEASE COMPLETE PERMISSION AND MEDICAL NOTE ATTACHED.
CHILDREN ARE UNABLE TO ATTEND THE EXCURSION UNLESS PERMISSION/MEDICAL
NOTES ARE COMPLETED.**

I give permission for my child to attend the excursion.

CHILD'S NAME: _____ CLASS: _____

PARENT'S NAME: _____

PARENT SIGNATURE: _____ DATE: _____

EXCURSION PAYMENT SLIP

PAYMENT: \$330

Payment can be made through:

Torrens Primary School website

www.torrensp.act.edu.au (Payment link)

(Student & family keys details available from the front office.)

On line receipt number: _____

Or:

- Cash
- EFTPOS
- Cheque – made out to Torrens Primary School

Student Name: _____ Class: _____

Family Surname: _____

Amount enclosed: _____

EXCURSION MEDICAL INFORMATION AND CONSENT FORM

This form is intended to be used to assist the school in the case of any medical treatment required or medical emergency involving a student on a category C & D excursion, overseas excursion, sports and all outdoor adventure activities. A copy of each student's form must be taken on the excursion.

The Directorate collects the information contained in this form to provide or arrange first aid and other medical treatments for students. The information collected will be held at your child's school and will be made available to staff of the school and to medical or paramedical staff in the case of an accident or emergency. The information contained in the form is personal information and it will be stored, used and disclosed in accordance with the requirements of the *Privacy Act 1998(Cwth)*. Parents/carers note that in the absence of an Emergency Treatment Plan only standard First Aid should be administered.

Personal Details

Student's Name:		Date of Birth:		Sex:	<input type="checkbox"/> M <input type="checkbox"/> F
School:	School Year:	Camp/Excursion:		Year 6 Sydney Trip	
Parent/Carer:					
Address:					
Contact Telephone Nos					
Business Hours:		After Hours:		Mobile:	
Other Contact for Emergency:			Telephone No:		
Name of Student's Doctor:			Telephone No:		
Medicare No:		Private Health Fund No:		Membership No:	
Ambulance Fund: NOTE: Parents are responsible for ambulance costs outside the ACT.					

Please tick if your child suffers any of the following:

- | | | | | |
|---|---|--|--|---|
| <input type="checkbox"/> allergies | <input type="checkbox"/> blood pressure | <input type="checkbox"/> epilepsy | <input type="checkbox"/> hayfever | <input type="checkbox"/> nose bleeds |
| <input type="checkbox"/> anaphylaxis | <input type="checkbox"/> diabetes | <input type="checkbox"/> fainting | <input type="checkbox"/> headaches | <input type="checkbox"/> reaction to drugs |
| <input type="checkbox"/> asthma | <input type="checkbox"/> eczema | <input type="checkbox"/> fits or blackouts | <input type="checkbox"/> heart condition | <input type="checkbox"/> sight/hearing problems |
| <input type="checkbox"/> other (please specify) _____ | | | | <input type="checkbox"/> sun screen sensitivity |

If you have ticked any of the boxes above an Emergency Treatment Plan must be provided. Proforma Plans are available from the school. *NB. Without an Emergency Treatment Plan the school can only provide first aid treatment.*

Date of last tetanus injection:	
Has the student suffered from any acute illness or injury or been treated by a medical practitioner for an illness or injury during the last 4 weeks?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If YES, please state nature of illness/injury and obtain a report from the doctor that the student is fit to undertake the camp/excursion	

Is the student presently taking any medication?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If YES, please state name of medication, dosage, etc. (Please note: The teacher in charge must be informed about the management of any medication prior to leaving on an excursion. Arrangements need to be agreed on the transport, storage and administration of medication. In all cases medication must be labelled with the students name, dosage and frequency of administration.):	
I consent to my child receiving paracetamol for temporary pain relief?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you aware of any physical or psychological limitations of your child? Please give details.	
Is there any other information which you believe may help us to provide the best possible care?	

Consent to medical attention: In the case of my child requiring medical treatment or in the case of a medical emergency, I consent to the school providing first aid or treatment as outlined in an emergency treatment plan and I further authorise the school, where it is impracticable to communicate with me, to arrange for him/her to receive such medical or surgical treatment as may be deemed necessary. I also undertake to pay any costs which may be incurred for the medical treatment, ambulance transport and drugs.

Signed