**Torrens Primary School** Ritchie Street TORRENS A.C.T. 2607

6142 0777 admin@torrensps.act.edu.au www.torrensps.act.edu.au

**Excursion:** Year 6 visit to Museum of Australian Democracy (MOAD) at Old Parliament House

**Anticipated group size:** 4 staff; 58 students **Staff/Student ratio:** 1:15

**Date(s) & Time(s):** Friday 10th May 2024 - 9.30am-2pm (Week 2)

**Transport arrangements:** Bus

**Cost: $** 11.50 *The school has made every effort to keep cost for this excursion at a minimum level. If necessary, parents or carers can confidentially discuss support to meet the cost of the excursion with the Principal. Please contact the front office if you would like to speak with the Principal.*

**Payment and notes due back to Front Office by**: Friday 3rd May 2024 (Week 1)

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**Purpose of excursion:** The MOAD excursion is tailor made for our Year 6 students at Torrens and will include visiting the House of Representatives, looking at how parliament works and doing some workshops about ‘student voice’.

**Activities:** Students tour both MOAD and the Ladies Rose Garden at Old Parliament House. In the garden, students will hear stories about the timeline and the first women to vote in Australia.

Lunch will be in the Ladies Rose Garden followed by a walk around the Parliamentary triangle looking at further sites of significance.

**Contingency (e.g., in case of wet weather):** The excursion can go ahead in inclement weather.

If the excursion cannot go ahead for any reason, you will receive a text message regarding alternative arrangements.

**What to pack, bring, wear:** Full school uniform must be worn, including hat. Students must bring their recess and lunch and a full water bottle.

**Staff who will be in attendance:** Kat Taylor (first aid), Dave Lewis, Executive teacher and a Learning Support Assistant.

**Behavioural expectations:** *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 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.*

**Excursion Risk Assessment:** Available to view at front office.

If you have any questions regarding this excursion, please contact your class teacher via the front office. Please return the permission and medical forms and make payment by the due date shown above.

***The Year 6 Teaching Team***

**Torrens Primary School** Ritchie Street TORRENS A.C.T. 2607

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**Permission To Attend - Year 6 excursion to MOAD**

I give permission for my child to attend the Year 6 excursion to MOAD at Old Parliament House on Friday 10th of May 2024, travelling to and from the school by bus.

*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.*

You have been asked recently to complete a ***Medical Information and Consent Form for 2024***. If you have *not* already returned this form (yellow note sent home in Week 1) please complete one from the front office or the school website. *If you have already returned your 2024 form to the school, there is no need to complete the one attached.*

Will your child require medication to be administered during the excursion (e.g., antihistamine, pain relief)?

Yes [ ]  No [ ]  If yes, please complete a *Medication Authorisation and Administration Record* (available through the front office or from the website).

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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**In case of an emergency during the excursion:**

Contact name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime contact phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full name of parent/ carer (please print):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the following information:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Medicare No: |  | Private Health Fund No: |  | Membership No: |  |
| Ambulance Fund: NOTE, Parents are responsible for ambulance costs outside the ACT. |  |

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class: \_\_\_\_\_\_\_\_\_\_

Name of Parent /Carer (Please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: *\_\_\_\_ /\_\_\_\_\_/\_\_\_\_\_*

***Please turn over for payment and privacy policy details***

**Payment details:**

**Cost: $11.50**

□ On-line ([www.torrensps.act.edu.au/payment](http://www.torrensps.act.edu.au/payment)) Receipt # \_\_\_\_\_\_\_\_\_\_\_ ,or

□ EFTPOS payment date: \_\_/\_\_/\_\_

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) on the About Us page.