



Canberra Study Tour 2017
PARENT INFORMATION AND FINAL CONSENT
FORM FOR SCHOOL EXCURSION

Dear Parent/Guardian

I am pleased to provide you with the following details regarding our Canberra Study Tour on 30 April to 4 May 2017.

This excursion has been planned to develop students' understanding of Civics, Citizenship, Science, The Arts and the role the Defence Force plays in our community. This will supplement the work being completed in your son's/daughter's classroom prior to, and upon return from the excursion.

The year 6 students will depart from Perth Airport at 1535 hours on Sunday 30 April and return to Perth Airport at 2130 hours on Thursday 4 May – see attached itinerary for full details of activities.

Travel will be by: Flights – Qantas. All travel in and around Canberra – Deane Transport Services.

Accommodation will be at Ibis Styles Eaglehawk, 999 Federal Highway NSW 2620. Students will be in single gender shared rooms. Supervisory staff will be in adjacent rooms within close proximity.

Number of students attending excursion: 24

Members of the supervisory team are: Russell Newbound, Adam O'Connor and Deb Cunningham.

Activities to be undertaken: see attached itinerary.

Special clothing or other items required: Students to wear their Canberra Study Tour Beanies during educational excursions. School uniform is to be worn on all educational excursions during the study tour. Students can bring an additional jacket/parka as the weather is typically very cold in Canberra during August.

Contact arrangements during the excursion:

Supervising staff: Please contact via the school on 9583 8800.

Accommodation: (02) 6241 6033 (emergency contact only).

Please sign and return the following two pages, providing final consent for your child to participate as well as the Medical Form. These are to be returned by Friday 31 March.

Kind regards

PRINCIPAL

ASSISTANT PRINCIPAL

20 March 2017

854.2/4.321

GOLDEN BAY PRIMARY SCHOOL	MON 01 MAY	TUE 02 MAY	WED 03 MAY	THU 04 MAY
SUN 30 APR	Breakfast	Breakfast	Breakfast	Breakfast
Depart Perth on QF718 . at 3.35pm	0900-1000hrs National Capital Exhibition (confirmed)	Australian War Memorial 1000hrs Arrive for Orientation 1045-1115hrs Attend School Wreath Laying Ceremony (SWLC) 1130-1215hrs Short facilitated tour "We will remember them" (confirmed)	0830-1000hrs Australian Institute of Sport (confirmed)	1000-1100hrs Royal Australian Mint (confirmed)
Arrive Canberra at 10.30pm	Parliament House 1030hrs Hospitality 1100hrs Tours 1200hrs PEO session (confirmed)	1400-1500hrs Electoral Education Centre (confirmed)	1030-1130hrs Lake cruise operated by Canberra Southern Cross Club (confirmed)	1130-1230hrs High Court of Australia (confirmed)
You will be met on arrival and transferred to Ibis Styles Eaglehawk	1400-1500hrs Museum of Australian Democracy at Old Parliament House *Who's the Boss" program (confirmed)	1530-1630hrs Bike ride arranged by Cycle Canberra Pick up/drop off at Questacon (confirmed)	1230-1400hrs National Gallery *guided* (confirmed)	1330-1500hrs Questacon (confirmed)
			1500-1700hrs National Museum "Meet the People" *guided* (confirmed)	Depart Canberra on QF719 at 7.10pm Arrive Perth at 8.45pm
Dinner on board	Dinner	Dinner	Dinner	
	1830-1930hrs Telstra Tower (confirmed)	1900-2030hrs National Dinosaur Museum *night tour* (confirmed)		



If your son/daughter has special needs please provide full details and include any relevant medical details on the attached Student Health Care Summary. If the proposed excursion poses any additional health risks to those identified in the Student Health Care Summary, e.g. if your child suffers from anaphylaxis there may be risks associated with the provision of meals and storage of an adrenaline auto injector at the appropriate temperature. Please outline additional health risks below:

I consent to _____ participating in the Canberra Study Tour from 30 April to 4 May 2017.

I give permission for my son/daughter to receive medical treatment in case of emergency. I am aware that the school and its employees are not responsible for personal injuries or property damage which may occur on an excursion, unless the school or its employees are proven to be negligent.

Parent signature

Date

Travel insurance advice

All students intending to participate in an interstate excursion need current travel insurance cover. **Students who do not have current insurance cover are not able to participate in the excursion.** Schools are sometimes asked by parents to arrange travel insurance or to provide recommendations about where to obtain travel insurance. The Department and schools are not permitted to obtain or broker travel insurance for students or any other person. Travel insurance cover can include items such as loss of baggage, cancellation or changes to student travel arrangements and personal accident and emergency procedures.

Parents are required to obtain travel insurance for their child whilst on the Canberra Study Tour. You should read the terms of your travel insurance carefully, particularly noting what circumstances and events are not covered by your policy. It is your responsibility to ensure that you are satisfied with the terms of the travel insurance that you obtain for your child.

Travel insurance can be obtained from any travel agent or insurance provider.

Travel insurance response

Travel Insurance documentation previously provided. Thank you.

Travel Insurance documentation still required – **please complete below:**

I confirm that I have arranged travel insurance with (name of insurer):

_____ Policy number: _____

Parent signature

Date

Please provide a copy of travel insurance documents for our records (if not previously provided). Thank you.



GOLDEN BAY PRIMARY SCHOOL MEDICAL REPORT FOR CANBERRA STUDY TOUR 2017

This information is intended to assist the school and supervising teachers in case of any emergency with your child.

Student's Name: _____

Date of birth: _____ Year: _____ Room: _____

Parent/Guardian's full name: _____

Address: _____

Emergency Contact Telephone: Home _____ Mobile _____

Work Number _____ Other Numbers _____

Name of Family Doctor/Medical Centre: _____ Telephone: _____

Medicare Number: _____ Medical/Hospital Insurance: _____

Please tick if your child suffers from any of the following (please tick the appropriate box):

Heart condition	<input type="checkbox"/>	Black outs	<input type="checkbox"/>	Travel sickness	<input type="checkbox"/>	Bee Sting / Insect Bite
Fits of any type	<input type="checkbox"/>	Asthma	<input type="checkbox"/>	Dizzy spells	<input type="checkbox"/>	Allergies <input type="checkbox"/>
Migraine	<input type="checkbox"/>	Seizures	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>	Food Allergies <input type="checkbox"/>
Fainting	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Other	<input type="checkbox"/>	

Other (please provide adequate information): _____

Please provide any other information about your child which will enable the organisers of the Canberra Study Tour to provide better care for your child. _____

Has a Golden Bay School Action Plan been filled out for any of the above conditions? Yes / No

Is your child allergic to any of the following? If so please give details:

- Penicillin _____
- Other drugs (please provide adequate information): _____
- Any foods: _____
- Other allergies: _____

What special care is recommended: _____

MEDICATION (Tablets and medicines) Parents/Guardians are requested to make arrangements with the teacher-in-charge for the safekeeping and handling of medications prior to the Canberra Study Tour.

- Is your child presently taking tablets and/or medicine? YES / NO
- Does your child self administer this medication? YES / NO
- If YES, please state name of medicine and dosage: _____

Tetanus immunisation: Last immunisation was on _____

Consent to medical attention

Where it is not practical to communicate with me, I authorise the teacher in charge of the Canberra Study Tour to consent to my child receiving such medical treatment as may be considered necessary. I am aware that Department of Education insurance does **not** cover personal accidents through misadventure nor loss or damage of personal belongings.

Consent: I agree to inform the organisers before the scheduled excursion departure of any change to my child's health and fitness so that appropriate supervision may be arranged. If there are any changes to medication/medical conditions a new form will need to be completed by parent and or guardian.

Signed: _____ (Parent/Guardian) Date: _____ 854.2/4.321