

Stage 1 Zoo Excursion at Shoalhaven Zoo Friday 12/8/2022

Dear Parent or Guardian,

We are excited to inform you that Stage 1 will be participating in an excursion to the zoo after 2 years of restrictions. School activities such as this one are planned to enhance and support classroom studies. This activity: Stage 1 Zoo Excursion, will enhance work in the Key Learning Areas of Science, Literacy and Creative Arts.

The activity is: **Stage 1 Zoo Excursion**

The activity is at: **Shoalhaven Zoo**

The activity date: **Friday 12/8/2022**

The group departs at: **8:00 am** from Mount Terry Public School

The group should return by: 2:30 pm

The group will return to: Mount Terry Public School

Travel is by: Bus with seatbelts

The cost of the activity: \$30 (which will be added to your **Term 3 School Invoice**)

Students who have not paid will not be permitted to attend this excursion

The activity will be supervised by: Miss Brooks, Mrs Bailey, Mrs Hood, Mrs Harris, Mr Huppertz, Mr Eshman, Miss Kencevski, Miss Kenny & Mrs James. All teachers are trained in CPR and Emergency Care.

Please return the form by Friday 29/7/2022

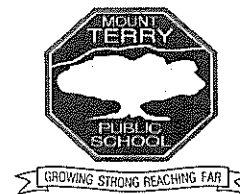
The students will need to bring the following for this activity:

- School uniform
- School hat
- Drink bottle
- Packed recess and lunch
- Small backpack

A risk management plan has been completed for this excursion/activity. A copy of the plan is available at the school's office.

Please keep this page for your own reference and complete the details on the attached page and return it no later than 29/7/2022.

M HUPPATZ
Organising Teacher



CONSENT FORM FOR Stage 1 Zoo Excursion at Shoalhaven Zoo Friday 12/8/2022

Please read carefully and complete all details

I hereby consent to of class.....
participating in the following activity.

I understand the activity is a Stage 1 Zoo Excursion

The date for this activity will be 12/8/2022

I understand that travel will be by: Bus with seatbelts

I understand that the bus will depart school at 8:00 am

I understand that the cost for this activity is: \$30 (which will be added to your Term 3 School Invoice)

I understand that in signing this permission form I commit to paying for this excursion in full through the Term 3 invoice.

1. List existing medical conditions or illnesses (include asthma, diabetes, epilepsy, allergies etc). Outline the treatment for each.

Not applicable

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2. Outline special dietary needs including possible reaction to certain foods.

Not applicable

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Signature of Parent of Guardian..... Date.....