



ACT
Government
Education



An ACT Government School
Respect / Tolerance & Inclusion / Excellence

57 Ratcliffe Crescent, Florey ACT 2615
PO Box 223, Kippax ACT 2615

Telephone (02) 6142 2730
Website: www.floreyyps.act.edu.au

Year 1/2 Fun Day - Boundless Playground
Wednesday 19 December 2018

Dear Parents/Carers

The end of the school year is fast approaching and the year 1/2 team would like to celebrate our fantastic year of learning. We have planned a visit to Boundless Playground.

Venue: *Boundless Playground
Kings Park
Parkes, ACT*

When: *Wednesday 19 December, 2018 (week 10, term 4)*

Time: *Depart Florey Primary School at 9:15am
Return to Florey Primary School at approximately 2:00pm*

Please note: students arrive and depart school at normal times

Travel: *Bus*

Cost: *\$5.00 (for bus travel)*

Please note: Completed permission note and payment must be returned by Monday 17 December. NO LATE NOTES/PAYMENTS WILL BE ACCEPTED

What to wear: Full school uniform

What to bring:

- ✓ a SunSmart hat
- ✓ Water bottle
- ✓ Fruit Break, Recess and Lunch
- ✓ Sunscreen

"Staff accompanying students on this excursion 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, willful or disobedient behaviour"

Mark Robson, Kate Yensch, Aaron Foy, Emillie Cottam, Sarah Warren, Helen Crane and Kelly Schutz

Permission note for the Year 1/2 Boundless Playground Fun Day

I Parent/Carer of _____ in class _____ give permission for my child to attend the year 1/2 **Boundless Playground Fun Day** on **Wednesday 19 December, 2018**. I understand that my child will be travelling by bus to and from the venue. I agree to my child taking part in the activities associated with this excursion.

Parent/Carer contact details for excursion: _____

I have read the information regarding this excursion and understand what it contains.

Parent/ Carer name: _____ Signature: _____ Date: _____

Is the information on your child's Medical consent form current? Yes/ No.

If this requires updating, please print a new form from the Florey Primary School website and return it before your child attends the excursion. It is a Departmental requirement that all children attending off site excursions have a current medical consent form.

Payment options: Cash/Cheque payable to Florey Primary School, Credit card, EFTPOS & EFT available for this excursion/activity

I enclose \$_____ by the following method:

- cash
- cheque (made payable to 'Florey Primary School')
- credit card (complete details on slip below)
- by EFTPOS at school
- EFT – Date of transfer _____

BSB: **032-777** Account No: **001279** Account Name: **Florey Primary School Management Account**
Details: **1/2 Fun Day** Students Name: _____

Please complete the details below to authorise payment for: 1/2 Fun Day

Student Name _____ Class _____

Name of Cardholder _____

Card Type Visa MasterCard

Card number

--	--	--	--	--

--	--	--	--	--

--	--	--	--

--	--	--	--

 Exp. Date

--	--

 /

--	--

Amount \$ _____

Cardholder signature _____ Date _____