

11th May 2017

Year 11 RESEARCH PROJECT EXCURSION - STATE LIBRARY of SOUTH AUSTRALIA

To Parents and Caregivers,

On Tuesday 30th May, all Year 11 Wirreanda Secondary School students will be taking part in an excursion to either the State Library of South Australia or Flinders University to support the development of their Research Project.

This experience is an important event for students to access primary resources as part of their research, which is one of the more challenging aspects of the research process.

Your child has chosen to attend the South Australian State Library option.

Excursion Details:

Date:	30th May 2017
Location/s:	State Library of South Australia
Cost:	\$2.60 Return train ticket to the city or Metro card
Time and location of departure to excursion:	8:55 am Noarlunga Centre Train Station – students to meet at 8:40 am
Transport description:	Public transport – Adelaide Metro Train
Time and location of departure back to school:	2pm Adelaide Railway Station
Arrival time & location:	Approximately 2:50pm Noarlunga Centre Train Station – students will be dismissed from here
Uniform:	Full School uniform required
Lunch Arrangements:	Bring own, or money/card to purchase a meal in the Food court
Extra Info:	Laptops not required for this trip
Teacher/s in charge	Natalie Maddern, Christine Roberts

Please complete the *attached* consent and medical form and return it no later than **Friday 19th May** to the Finance Office. Any queries can be made by contacting the school on 8329 7200.

Yours sincerely,

Natalie Maddern
Teacher in charge

Rhoni McFarlane
Deputy Principal

Caroline Fishpool
Principal

Payment & Medical Information

Student Name: _____

HG: _____

PAYMENT DETAILS

Deposit amount:		Deposit Due:		Total Amount:		Total Due:	
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MEDICAL INFORMATION

Information contained in this section is necessary to ensure that the student's medical conditions are properly managed, however, no student with special needs will be excluded unless on medical advice.

DOES YOUR CHILD HAVE ANY OF THE FOLLOWING MEDICAL CONDITIONS?	CIRCLE ANSWER	FURTHER INFORMATION OR SPECIAL INSTRUCTIONS IF MEDICATION REQUIRED, SEND WITH STUDENT
CONVULSION / SEIZURES	YES/NO	
ASTHMA OR OTHER CHEST PROBLEMS	YES/NO	
ALLERGIES (EG Bee Sting)	YES/NO	
DIABETES	YES/NO	
VISION/HEARING PROBLEMS	YES/NO	
EAR DISORDER (EG Drainage tubes)	YES/NO	
DERMATITIS	YES/NO	
OTHER RELEVANT CONDITIONS (eg ADHD)	YES/NO	
MEDICATION (eg any current medication)	YES/NO	

EMERGENCY CONTACTS:

Name: _____ Relationship to student: _____

Phone: _____

Student Mobile Number: _____