

12 April 2018

**Stage 1 & 2 English Excursion - *Terrestrial***

To Parents and Caregivers,

As part of the Stage 1 English course (*All the World's a Stage*) and the Stage 2 English course, students will be completing a Theatre Study. As such, we have arranged for students to attend a live performance of the play, *Terrestrial*, which is being performed at the Space Theatre in Adelaide. The performance runs for approximately 60 minutes, followed by a 20 minute question and answer session with the director and cast. This will assist students in completing their subsequent Text Analysis assessment task.

**Excursion Details:**

<b>Date:</b>	Tuesday 29th May 2018
<b>Location/s:</b>	Space Theatre (Festival Centre), Adelaide
<b>Cost:</b>	The school will subsidise student tickets, bringing the cost down to \$7.00 per student. As it is important that students attend, please contact the school prior to this date if there is a pressing financial concern regarding the cost of this excursion.
<b>Time and location of departure to excursion:</b>	Students will meet staff at the <b>Noarlunga Interchange</b> at <b>8:45am</b> . As a group, we will walk to the theatre which is situated behind the Adelaide train station.
<b>Transport description:</b>	Students must bring a <b>Metrocard</b> or <b>money</b> to purchase a return train ticket from Noarlunga Interchange to Adelaide on the day of the excursion.
<b>Time and location of departure from excursion:</b>	Students will depart the Adelaide train station at 2:20pm.
<b>Arrival time &amp; location of dismissal:</b>	Students be dismissed from the Noarlunga Interchange at approximately 3:00 pm.
<b>Uniform:</b>	Students are to wear correct Wirreanda Secondary School Uniform.
<b>Lunch Arrangements:</b>	Following the performance, the group will walk to the Rundle Mall food court to purchase/eat lunch.
<b>Extra Information:</b>	Students are to demonstrate the school values and follow instructions given to them.
<b>Teacher/s in charge</b>	Natalie Maddern, Sol Naidu and Briony Steele

Please complete the *attached* consent and medical form and return it no later than **Friday 11th April, 2018**, together with \$7 to the Finance Office. Any queries can be made by contacting the school on 8329 7200.

Yours sincerely,



Natalie Maddern  
English Coordinator



Sol Naidu  
Senior School Coordinator



Caroline Fishpool  
Principal

## Payment & Medical Information

Year 11 and 12 English Excursion - *Terrestrial*

Student Name:

HG:

Parent Signature:

### PAYMENT DETAILS

Deposit amount:	NA	Deposit Due:	NA	Total Amount:	\$7	Total Due:	\$7
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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: \_\_\_\_\_



CONSENT FORM FOR CAMP/EXCURSION

(To be completed in conjunction with medical information and activity information sheets)

Please use block letters when filling out this form

As a parent/guardian of:

STUDENT/CHILD'S NAME

I:

PARENT/GUARDIAN NAME

give my consent for him/her to participate in:

NAME OF ACTIVITY: Stage 1 and Stage 2 English Excursion - Terrestrial
REASON FOR AND DESCRIPTION OF ACTIVITY: The English Curriculum allows for students to attend a live performance and respond to that performance with an emphasis on the particular unique features of this text type.

at/on:

LOCATION: Space Theatre (Festival Centre), Adelaide

FROM: TO: OR ON: 29 05 2018

The school/preschool will use the student's current Health Care Plan unless otherwise instructed.

Has a current Health Care Plan been provided to the school/preschool? Yes [ ] No [ ]

If No, please provide an updated Health Care Plan to the school/preschool on completion of this form.

Details of planned activities, transport arrangements, anticipated number of students/children and supervising teachers/instructors are provided on the information sheet attached.

Agreement

- I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
In the event of an accident or illness and contact with me being impractical or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary.
I have also attached additional or updated health care information, including details of any additional health support he/she requires to undertake the above activities safely.
The information given is accurate to the best of my knowledge.

Signed: \_\_\_\_\_

Date: / /

Emergency Contacts - Parent/Guardian

NAME, ADDRESS, POSTCODE, HOME TELEPHONE, WORK TELEPHONE, ALTERNATIVE TELEPHONE

Student Medic Alert Number (If applicable):

\*Any health care information provided is not intended to prevent your child participating unless specific medical advice warrants exclusion. The health care information you supply to the school/preschool will be treated confidentially.

