

1 February 2019

Stage 2 English Excursion - CityMag: Adelaide

To Parents and Caregivers,

As part of the Stage 2 English course, all students will be writing an informative piece highlighting one or more aspects of Adelaide and which would be suitable for publication in the *CityMag*. As such, I have arranged an excursion to Adelaide city, where students will visit key landmarks to make descriptive and anecdotal notes and take photographs that will assist them in creating their article for assessment.

Excursion Details:


Date:	Monday, 11 February, 2019
Location/s:	Various sites in Adelaide city including but not limited to the Central Markets, Rundle Mall and Botanic Gardens (subject to weather conditions)
Cost:	No entry fees.
Time and location of departure to excursion:	Students will meet staff at the Noarlunga Interchange at 8:45am . As a group, we will walk between sights in Adelaide city.
Transport description:	Students must bring a Metrocard or money to purchase a return train ticket from Noarlunga Interchange to Adelaide on the day of the excursion.
Time and location of departure from excursion:	Students will depart the Adelaide train station at 2:20pm.
Arrival time & location of dismissal:	Students be dismissed from the Noarlunga Interchange at approximately 3pm.
Uniform:	Students are to wear correct Wirreanda Secondary School Uniform.
Lunch Arrangements:	Students may bring a packed lunch, however they can also purchase/eat lunch either at the Botanic Gardens or in the Rundle Mall food court.
Extra Information:	Students are to demonstrate the school values and follow instructions given to them. Students should bring a phone and/or camera to take photos, a notepad and pen to record their observations.
Teacher/s in charge	Natalie Maddern

Please complete the *attached* consent and medical form and return it no later than **Tuesday 5th February, 2019**, to the Finance Office. Any queries can be made by contacting the school on 8329 7200.

Yours sincerely,



Natalie Maddern
Learning Area Leader



Shane Cunningham
Deputy Principal



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: Year 12 English Excursion - CityMag - Adelaide City Tour
REASON FOR AND DESCRIPTION OF ACTIVITY: Year 12 English - Creating Texts assessment task. Note-taking, gathering evidence and photographs for publication.

at/on:

LOCATION: Adelaide City - various sites depending on weather

FROM: TO: OR ON: 11 02 2019

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 impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child.
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. I also consent to my child's doctor or medical specialist being contacted in an emergency.
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. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any health care problems.

Payment & Medical Information

Year 12 English Excursion to Adelaide City

Student Name:

HG:

Parent Signature:

PAYMENT DETAILS

Deposit amount:	NA	Deposit Due:	NA	Total Amount:	NA	Total Due:	NA
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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: _____

