



WERRIBEE PRIMARY SCHOOL NO. 649

Deutgam Street, Werribee 3030

Melbourne SEA LIFE Aquarium - Survival In the Sea

Date: Tuesday 6 March

Students will embark on an underwater journey to meet the amazing animals on display and discover their unique features. Students will identify the basic needs of living things and learn about the diverse ways animals survive in their habitats. They will also learn how some animals' features change as they grow from babies to adults.

Point Gellibrand Coastal Park

At Point Gellibrand in Williamstown, there are rock pools which can be explored at low tide. While supervised, the students will have fun hopping over the rocks and looking for sea creatures.

Dear Parents/Guardians,

School excursions enhance students' learning by providing the opportunities for students to participate in curriculum-related activities outside the normal school routine. School excursions are well-planned curriculum-related activities.

For your child to participate in the excursion you must complete the consent form reply slip below and return it, along with any money to cover the cost of the excursion, to the school by the due date listed below.

Details are as follows:

Teacher in charge: Mrs Jo-anne Wembridge

Classes involved: Year 1

Date for the excursion: Tuesday 6 March

Cost: \$30 (includes school discounted Aquarium admission and bus costs)

Time leaving the school: 9:00am

Venue: Melb Aquarium and Point Gellibrand Coastal Park

Time returning to the school: 3:10pm

Means of transport: Bus

Lunch & other materials/equipment required:

Full school uniform is to be worn, including a hat. Students must wear runners.

Please bring lunch, snack and drink in a SMALL bag/backpack.

Mrs Jo-anne Wembridge (Contact/Coordinating Teacher: 9742 6659)

David Quinn (Principal)

Please detach and return the consent form and any money to your teacher by: 9:00am on Friday 3 March



SEA LIFE EXCURSION

FIRST NAME **SURNAME:** **CLASS**

I give permission for my child to participate in the **SEA LIFE excursion on Tuesday 6 March, 2018.**

I wish to pay in the following manner:

- ☐ I enclose \$_____ Cash/Cheque
- ☐ BPAY (Please contact office for Biller Code and Reference No.) BPAY Receipt No: _____
- ☐ CSEF (Camps, Sport & Excursion Fund) If applicable
- ☐ Credit Card / Debit Card at front office
- ☐ Direct Deposit to:

Account Name: Werribee Primary School Council

BSB: 063 541

Account Name: 10393050

Bank: Commonwealth Bank of Australia

Please include student name in reference field when making payment

I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to the child receiving such medical or surgical treatment as may be deemed necessary.

Parent's/Guardian's signature **Date**

Special Provision - In compliance with DET Practices it is necessary for parents to notify schools of any **special medical circumstance** that exists in relation to school camps, excursions and sporting activities. As a consequence we request parents to indicate below any special medical circumstance that relates to a child participating in any of the above activities.

Medical Circumstance ☒

Diabetes ☐ Epilepsy ☐ Asthma ☐ Haemophilia ☐ Anaphylaxis ☐
Other ☐ Please specify

On this day I/we can be contacted at Phone

NON RETURN OF THIS SIGNED, DATED FORM EXCLUDES YOUR CHILD FROM THIS EXCURSION.