

CAMBRIDGE PARK PUBLIC SCHOOL

35 Oxford Street, Cambridge Park 2747
P.O Box 8021, Werrington, L.P.O
Dunheved Road, Werrington County, 2747
Phone: (02) 4721 2556
Fax: (02) 4721 7567

Stage 3 Canberra and Snowy Mountains Excursion – Change of date and venue

Dear Parent or Caregiver,

Stage 3 will be going on an overnight excursion from Monday, 21 September, 2020 to Wednesday, 23 September, 2020.

Accommodation will be at Capital Airport Motel in Queanbeyan.

This excursion has been planned to supplement the following work being done in the classroom: *History*. Due to the change of date, which has affected the venues we will attend as well as the accommodation, the cost of the excursion is \$365, which includes \$2.00 GST for food.

A deposit of \$50.00 is required by Friday 3 July, 2020. The balance of payment for the excursion may be made in instalments. Final payment is due by Friday 28 August, 2020.

The group will depart on Monday 21 September, 2020 at approximately 5:30am and return on Wednesday 23 September, 2020 at approximately 6:00pm. Travel will be by bus.

All staff members attending are trained in emergency care, anaphylaxis and CPR training. The group will be supervised by Mrs Wiggins.

Refunds for this excursion will only be given in line with the school's refund policy, or should the excursion be unable to proceed due to Departmental guidelines.

This excursion has the approval of the principal.

Principal- Miss K Berwick

Excursion coordinator -Mrs Wiggins

Privacy - advice

The information provided on is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about your child who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Cambridge Park Public School.

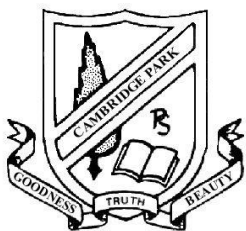
It will be used by the NSW Department of Education to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

A failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

You may correct any personal information provided at any time by contacting the school office.



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Stage 3 Canberra and Snowy Mountains Excursion

Please detach and return to office with payment by Friday 3 July, 2020.

I consent to of class
participating in an excursion to the Canberra and Snowy Mountains from Monday 21 September, 2020 to
Wednesday 23 September, 2020.

I understand my son / daughter will be staying over two nights.

The cost of the camp is \$365.

☐

I enclose a deposit of \$50.00 **OR**

☐

I have previously paid the deposit (NOTE: A new permission note is required due to the change of
date and venue).

My son / daughter has the following special needs (please provide full details and include any relevant
medical details)

.....
I understand that my child will receive medical treatment in the case of an emergency.

IMPORTANT NOTE:

When a medical practitioner has prescribed medication (including emergency medication) that will need to be
administered during the excursion, parents are responsible for:

- Bringing this need to the attention of the school.
- Ensuring that the information is updated if it changes
- Supplying the medication and any 'consumables' necessary for its administration in a timely way.
- Collaborating with the school in working out arrangements for the supply and administration of the
prescribed medication for the duration of the excursion.
- For some excursions the school will ask you to supply the medication in a different way to what has been
already been agreed to by school. You may be asked to supply an additional adrenaline auto injector
(i.e. EpiPen®) for example.
- The medication should be well within its expiry date.

Signature _____

Parent / Caregiver

Date _____

☐

I have made an online payment. My receipt number is _____ **OR**

☐

I have enclosed cash payment of _____ **OR**

☐

I wish to pay by credit/debit card.