



# Gooseberry Hill Primary School

## Excursion Permission Slip

SCULPTURES BY THE SEA

**Description of Activities:** Students will be viewing the sculptures for their artistic qualities and they will be listening to a presentation by one of the artists.

**Date:** Friday 6 March 2020

**Depart Time:** 8:45am

**Return Time:** 2:50pm

**Class:** Year 5 children

**Cost:** \$10.00

**Venue:** Cottesloe Beach

**Staff Attending** Anne Byrne, Natalie Scott, Fiona Elsegood, Barbara Mitchell, Tracey Read.

**Student Requirements:** The students need to wear their school uniform and closed in joggers. They can wear their bathers under their uniform as they will be allowed to go for a swim. Please ensure they bring underwear to change into for the ride back on the bus. They will need a beach towel, rashee, hat, sunscreen, morning tea, lunch and water.

**Students must be at school by 8:30 am to board the bus at 8:40 am.**

**Parent/guardians:** Extra assistance is required on this excursion. If you are able to volunteer, please indicate on Permission Slip.

**Please Note: Students who have not returned a signed consent form will not be able to participate in this excursion**

Fiona Elsegood  
Deputy Principal

✂-----

### SCULPTURES BY THE SEA PERMISSION FORM

#### Parent/Guardian Consent

I give consent for my child \_\_\_\_\_ (full name) Room \_\_\_\_\_ to attend this excursion. I understand the nature of the activities proposed and give staff permission to consent to any emergency medical treatment considered necessary. I am also aware that normal school rules apply and the Education Department insurance does not cover loss or damage of personal belongings.

Name of Guardian \_\_\_\_\_ Contact No: \_\_\_\_\_

**I am able to assist on this excursion:** Yes / No (please circle)

The following details have changed from those recorded on my child's Student Health Form:

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

### SCULPTURES BY THE SEA PAYMENT FORM

Full name of student \_\_\_\_\_ Room \_\_\_\_\_

Payment \$ \_\_\_\_\_ which is full payment for the excursion via

Cash  Cheque  Prepaid

EFT deposit Gooseberry Hill Primary School BSB 066-112 Account # 00900983 (Use child's name as reference)

Reference on EFT \_\_\_\_\_ Total Amount \_\_\_\_\_

**Please return together with payment or EFT receipt to the front office**