# Maths Day Excursion

## Grades Prep, 1 and 2

**Date:** Monday 10th October, 2016

**Details:** Students will be participating in a series of maths activities designed to promote problem solving strategies.

**Venue:** Harcourt Valley Primary School, Wilkinson Street, Harcourt, Victoria 3453

**Departure:** Students will depart Maldon Primary School at 9.10am. Students will travel in a coach supplied by Castlemaine Bus Lines. The coach is fitted with seat belts.

**Return:** Students will return to school by 1.00pm and participate in normal classes for the remainder of the afternoon.

**Requirements:** Students are required to wear full school uniform. 
**Students are to bring fruit, recess snack, lunch and a drink bottle. All items must be clearly named.**

**Supervision:** Bernadette McKenna (teacher in charge of the excursion), John Paton and Kay Scanlan.

**Cost:** $1 (The cost of the bus is being covered by the Mount Alexander Maths Network)

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**Please return attached permission slip and payment to school by Wednesday 5th October, 2016**
Maths Day Excursion
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Student behaviour
‘I understand that in the event of my son’s/daughter’s misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.’

Consent for emergency transportation
‘In the event of an emergency I consent to my child being transported in a privately owned vehicle driven by a member of the supervisory staff listed above.’

Student accident insurance
The Department of Education does not provide student accident cover. Parents may wish to obtain student accident insurance cover from a commercial insurer, depending on their health insurance arrangements and any other personal considerations.

Parent consent
I have read all of the above information provided by the school in relation to the Maths Day Excursion Gr Prep-2.

I give permission for my daughter/son ____________________________ (full name) to attend.

Where the teacher in charge of the Maths Day excursion is unable to contact me, or it is impractical to contact me, I authorise the teacher in charge to:

- Consent to my child receiving such medical or surgical treatment as may be deemed necessary by a medical practitioner and
- Administer such first aid as the teacher in charge may judge to be reasonable necessary.

Parent/guardian: ____________________________ (full name)
___________________________ (signature) ____________ (date)

In case of emergency I can be contacted on:
____________________________
OR
____________________________

Does your child suffer from any illness, allergy or condition which is relevant to this excursion?  ☐ Yes  ☐ No
If yes, please provide details below.
______________________________________________________________________________

Will your child need to take any medication whilst on the excursion?  ☐ Yes  ☐ No
If yes, provide the name of medication, dose and describe when and how it is taken.
______________________________________________________________________________

Please use money already on my account  ☐ OR  Payment enclosed  $ __________

Parent helpers required
I am available to attend the excursion as a parent helper if required  ☐ Yes  ☐ No  ☐
(all parent helpers MUST possess a WWC check which has been sighted by the office)