



**DARKAN PRIMARY SCHOOL**  
*"Everyone is a learner everyday."*

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## PARENT INFORMATION FOR SCHOOL EXCURSION

*To be retained by the parent/guardian providing consent*

Dear Parent/Carer,

I am pleased to provide you with the following information regarding an off-site excursion. This information is provided to assist you in giving consent for your child's involvement.

### PRE-PRIMARY – 6 (CARNIVAL)

<b>Excursion title</b>	FACTION ATHLETICS PRACTICE AND CARNIVAL
<b>Location/Venue</b>	DARKAN TOWN OVAL
<b>Reason for the excursion</b>	To participate at a school level in athletics events as part of the physical education program
<b>Activities to be conducted</b>	Various sporting and athletics events and games
<b>Date(s)</b>	TUESDAY 10 <sup>TH</sup> SEPTEMBER (PRACTICE) <u>AND</u> FRIDAY 13 <sup>TH</sup> SEPTEMBER 2024
<b>Departure day/time</b>	TUESDAY 10 <sup>th</sup> : 12:00pm FRIDAY 13 <sup>th</sup> : 8:30am
<b>Return day/time</b>	TUESDAY 10 <sup>th</sup> : 1.30pm FRIDAY 13 <sup>th</sup> : when complete
<b>Cost to student</b>	Nil
<b>Transport</b>	10 <sup>th</sup> : WALKING TO OVAL 13 <sup>th</sup> : (ATHLETICS CARNIVAL): Parents coming to the carnival are asked to take their children to the oval to start the school day at 8:30am. School buses will drop off and pick up children to/from the oval.
<b>Staff member in charge of the excursion</b>	Rebecca Clarke
<b>Supervisory staff</b>	Michelle Williamson, Rebecca Clarke, Sophie Telfer, Katherine Barritt, Emily Hardy, Sam Tooke, Deb Lynass, Toia Keefe
<b>Additional supervisors</b>	Parent Volunteers
<b>Relevant qualifications held by one or more of the supervisory team</b>	Senior First Aid
<b>Contact arrangements during the excursion</b>	Darkan Primary School 6716 8900
<b>In case of student accident/illness</b>	Basic first aid will be administered by staff. In event of a serious injury 000 will be called.
<b>Special clothing or other items required</b>	Darkan Primary School faction t-shirts, hat, appropriate footwear, water bottle and sunscreen.
<b>Additional information</b>	Kindy children will start their day at school, come at 11:30am to the oval to complete their events and then be dismissed from the oval

## PARENT CONSENT FOR SCHOOL EXCURSION

To be returned to the school by FRIDAY 6<sup>th</sup> September 2024

I have read and understood the information regarding the excursion below. I consent to my child/ren

\_\_\_\_\_ participating in the excursion titled below.

OR

My child/ren \_\_\_\_\_ will NOT be attending this excursion because

\_\_\_\_\_.

Excursion title	<b><u>PRE-PRIMARY – YEAR 6 FACTION ATHLETICS PRACTICE AND CARNIVAL</u></b>
Date(s)	TUESDAY 10 <sup>TH</sup> SEPTEMBER 2024 (Practice Day) FRIDAY 13 <sup>th</sup> SEPTEMBER 2024(Carnival Day)

### ***Student Health Care***

Supervisors will refer to the Student Health Care Summary held at the school prior to the excursion. If your son/daughter has any special health needs that are not included in the health care information that you have previously provided to the school, please outline these additional health risks below (details provided will be used to update student health records). If you are unsure about the Health records currently held by the school please provide all medical information below or contact the School's Administration for a copy of the record held at the school.

### ***Student Behaviour***

It is expected that all students will adhere to the school's behaviour expectations whilst involved in school activities. Students who do not meet the behaviour expectations may be:

- exempt from an activity at the excursion;
- excluded from the excursion at the expense of the parents/carers.

I give permission for my son/daughter to receive medical treatment in case of emergency.

I am aware that the school and its employees are not responsible for personal injuries or property damage which may occur on an excursion, unless the school or its employees are proven to be negligent.

In cases of excursions, costs incurred as a result of accident or illness is the responsibility of the parent/guardian.

If my child does not meet the behaviour expectations, I am aware that they may be excluded from an activity or be removed from the excursion at my expense.

\_\_\_\_\_  
Parent/guardian name      Parent/guardian signature      Date

**Form to be returned to FRONT OFFICE by Friday 6<sup>th</sup> September 2024**