Grade One
Scienceworks Excursion
Friday the 11th of September 2015

19th August 2015

Dear Parents / Guardians,

In line with our Units of Inquiry for this semester, students in Grade One will be attending Scienceworks on Friday the 11th of September. This excursion will support and enhance our inquiries: “Weather affects our lives in different ways”; “As technology changes, we learn more about Space” and introduce concepts relating to our sixth and final inquiry, “The choices we make influence our health”.

At Scienceworks, our students will attend a presentation of the program “Tilt”, at the Planetarium, visit the Lightning room to view the “Safety & Light” show, in addition to spending viewing time in the Sportsworks exhibition.

- **Date:** Friday the 11th of September 2015.
- **Venue:** Scienceworks, Spotswood.
- **Time:** Depart 9:10 am, to return at 2:45 pm.
- **Cost:** $17.00 per student.
- **Transport:** 3 x 53 seat buses, fitted with seatbelts.
- **Dress:** Seabrook School Uniform (No coats required as venue is under cover).
- **Bring:** Morning snack and lunch in separate plastic bags please, named and labelled.

*No regular plastic drink bottles or cans please, only disposable drinks (ie: small water bottles or fruit drink boxes). *Drinking water is available from fountains at the venue.*

We will require parent helpers to assist with supervision of students. Please complete the form overleaf and send to your child’s class teacher if you are able to help on this day. As full student supervision is required, it would not be appropriate to bring younger siblings. Parent helpers will accompany us on the buses.

Please return your signed permission note and payment to school by Monday the 7th of September, 2015.

Thank you,

Mrs Jones, Miss Smith, Mrs Dobson, Mrs Collyer, Mr Veale, Mrs Trajkovski

Grade One Teachers
PERMISSION SLIP

GRADE 1 – SCIENCEWORKS 11th September 2015
(Please complete and return to your child’s teacher).

STUDENT: ____________________________ GRADE: ______

TEACHER: ____________________________

I hereby give permission for my child to attend the school activity mentioned above. I authorise the teacher in charge of the activity to consent where it is impracticable to communicate with me to my child receiving such medical or surgical treatment as may be deemed necessary.

CONSENT STATEMENT: Please indicate by ticking YES or NO

Does your child suffer from an allergy? □ YES ________________ □ NO ________________
(If yes, please write allergy above)

Is your child on any medication? □ YES ________________ □ NO ________________
(If yes, please write medication above)

PARENT/GUARDIAN SIGNATURE: ____________________________ DATE: ____________

Contact number in case of emergency ____________________________

Relationship to child: ____________________________

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PARENT HELPER

GRADE 1 - SCIENCEWORKS
FRIDAY 11th of SEPTEMBER 2015
(Please complete and return to your child’s class teacher if able to assist).

I am able to assist at the Scienceworks excursion on Friday 11th of September, 2015

Name: ____________________________

Signed: ____________________________ Dated: ____________________________