

Grade 2 Transport Excursion

Friday, 15th September, 2017



25th August, 2017

Dear Parents,

As part of our unit of work this term based on Transport, the Grade 2s will be travelling by bus to and from the city. We will visit Polly Woodside and have a ride along the Yarra River in a ferry. We will also have a look around the city, discussing the different forms of transport that we see.

We will be leaving school at **8.15 am sharp** and returning at approx. **3.30 pm**. ***The children need to be at school at 8.00 am sharp.***

The cost of this excursion is \$38.00 and is covered by the excursion levy.

Students will need to wear school uniform. It is advisable to have a light rain jacket to wear on the ferry as it may be cold. They should bring separate named bags for their lunch and playlunch as well as a drink that they can carry during the day – named also please.

Could you please return the slip below and payment, (if applicable) by MONDAY, 11th SEPTEMBER, 2017. Please note there can be no refunds and **no late forms or payments can be accepted.**

Thank you so much!
The Grade 2 Teachers



Grade 2 Transport Excursion – Friday, 15th September, 2017
Payment and permission forms due back by Monday, 11th September 2017
(Please note we cannot accept late payments and permission forms)

My child.....Grade..... has my permission to attend the above excursion.

- I enclose \$38.00 for full payment
- Please deduct \$38.00 payment from my incursion/excursion levy



Medical Condition details:

Please tick if your child suffers with the following Medical Conditions:-

- Asthma
- Allergies (please specify)
- Other

I authorise the teacher in charge to consent where it is impracticable to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary. I accept all operation, blood transfusions, and/or anaesthetic risks involved and the responsibility for payment of any expenses thus incurred.

.....
Parent/Guardian's Signature

.....
Contact telephone number for excursion day

Credit Card Payment

Card Account No.

[] [] [] [] []	[] [] [] [] []	[] [] [] [] []	[] [] [] [] []
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Please charge my:

- Master Card
- Visa

Expiry Date: [] [] / [] [] **Signature:**.....

Name Telephone No.....

Amount: \$38.00