

## Community Walks Kindergarten

Dear families

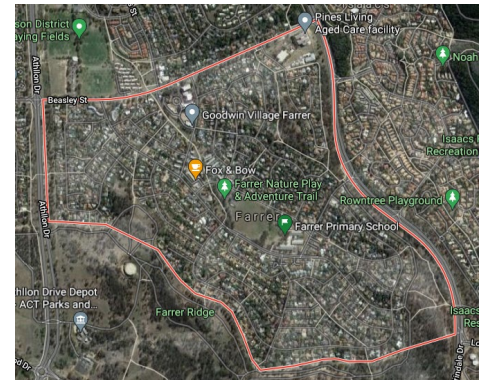
In Term 3 our geography unit will focus on 'Special Places'. To consolidate this learning and provide students with meaningful learning opportunities we will be undertaking some walks around the Farrer community. We may visit the local shops, cafes, restaurants, houses, Farrer Ridge, nature play space and other significant places within the Farrer community. Our community walks will take place within the suburb of Farrer (see attached map).

This learning may take place in small groups or as a whole cohort. Students will be supervised and accompanied by class teachers at all times. As this learning will take place for the duration of Term 3 we are asking parents to sign the permission slip below with the knowledge that permission is granted for the whole of Term 3. We will communicate via email our intentions to leave school grounds a few days prior to planned walks.

Should you need to contact your child or their teacher while we are out, we ask that you please call the school on 6142 0860 and they will pass on a message.

Students are required to demonstrate our school values of excellence, innovation, sustainability, inclusion and support and show the expectations by being safe, respectful, responsible learners during this experience.

An excursion risk assessment has been prepared and is available on request. Please return the permission slip below by **Friday 23 July 2021**. If you have any questions please don't hesitate to contact your child's teacher.



*Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities.*

*Parents should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.*

Kind regards,

Prue Anderson and Jasmin Cerni  
Classroom Teachers  
19 July 2021



**ACT**  
Government  
Education



FARRER PRIMARY SCHOOL  
Lambrigg Street, Farrer ACT 2607  
Phone: (02) 6142 0860  
Email: [info@farrerps.act.edu.au](mailto:info@farrerps.act.edu.au)  
Web: [www.farrerps.act.edu.au](http://www.farrerps.act.edu.au)  
Principal: Liz Wallace

## Excursion Permission Note for Parents

I give permission for my child \_\_\_\_\_ in year KA / KC to attend the **Farrer Primary School Kindergarten Farrer community walks** across **Term 3**. I understand the details as outlined in the Excursion Information for Parents.

*I agree to my child participating in the activities associated with this excursion mentioned previously. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this excursion.*

*I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.*

The [Medical Information and consent](#) form only needs to be completed once/year prior to the first excursion unless there are changes to the details on this form. Are there any changes to this form?

Yes  No

If yes, an updated *Medical Information and Consent Form* is required to be completed (available through the front office).

Will your child require medication to be administered during the excursion (e.g. allergy medication, pain relief)?

Yes  No

If yes, please complete a *Medication Authorisation and Administration Record* (available through the front office).

Is there any additional information you need to provide to support your child's participation in this excursion?

Yes  No

If yes, please provide these details

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please provide the following information:

Medicare No:		Private Health Fund:		Membership No	
Ambulance Fund: Parents are responsible for ambulance costs outside the ACT.					

Name of Parent/Carer: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### In case of emergency

Contact person on the day: \_\_\_\_\_

Contact person's best phone number: \_\_\_\_\_