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## YEAR 2 EXCURSION – CONNECT WITH HERITAGE

16 August 2024

Dear Parent/Carer,

In Term 4, the Year 2 students will be attending an excursion to Newstead House as part of our HASS unit, "Past and Present Connections to People and Places." The excursion is a fun and informative day where students explore old-style equipment to see how technological changes have made daily life easier.

Students will be participating in the following activities:

- Kate's Garden – Students will engage their senses with a variety of plants and complete a gardening activity.
- Mrs Fletcher's Washday Wonders – Students will use authentic hands-on historical washing techniques.
- Games on the Green and Manners – Students will participate in a range of colonial outdoor games and practice 'manners' with Kate Leslie.
- Artefact Exploration – Students will be able to look at and touch a variety of historical artefacts.

**Date:** Wednesday 30 October (2B, 2L, 2H)

Thursday 31 October (2S, 2C, 2T, 1/2B -Year 2 students only)

**Activity Costs:** \$38.85 (invoice to be emailed).

**Payment Deadline:** 16 October 2024

**Payment Options:** *Payment can be made by BPoint using the link on your Invoice, by the QParent App if you are registered, or in person at the school office via cash, EFTPOS or cheque. Payment must be received by the deadline above to ensure your child's participation in this incursion.*

**Refunds:** The decision as to whether the school will or not refund the payment in part or in full depends on whether the school has incurred any costs associated with the activity.

**Transport:** Bus

**Departure/Arrival:**  
8:15am – Students meet at the classroom  
8:30am – Bus departs  
3:00pm – Return to school

**Wear and Bring:** Full Formal School uniform, white socks, black shoes and school hat. It is strongly encouraged that students wear sunscreen and insect repellent (apply before school). Small backpack containing water bottle, raincoat and litter-free morning tea and lunch. No tuckshop will be available on this day.

**Medication:** Any students requiring medication for the day (e.g. Ventolin, EpiPen) will need to ensure your teacher is aware of these requirements and appropriate documentation has been completed. Students who take daily medication at school: this will be provided as normal at the regular time by the teacher. Teachers will carry medication and first aid packs.

**Risk:**


Due to the nature of these activities, they carry a medium level of risk. School staff are aware of risks around environmental conditions, activities, demonstrations, facilities, group sizes and adult ratios and effective supervision. All students are advised of the process before starting each activity. Provisions have also been made for any students with a disability and/or medical and/or individual requirements.


**Parent Helpers:**

Three parent helpers (per class) will be required to assist on the day. If you would like to assist, please let your child's teacher know. If we have more parent volunteers than required, a random draw will occur.

Please complete the attached consent form and return to the office by 16 October

For further information about the activity, please contact your child's teacher.

  
Adele Brady  
Excursion Co-ordinator

  
Allira Campbell-Jeffrey  
Deputy Principal

## ACTIVITY CONSENT FORM – YEAR 2 EXCURSION – CONNECT WITH HERITAGE

STUDENT NAME: \_\_\_\_\_ CLASS: \_\_\_\_\_

**Privacy Statement**

The Department of Education is collecting the personal information in this form in order to:

- obtain consent for the named child/student to participate in the excursion;
- help coordinate the excursion;
- respond to any injury or medical condition that may arise during or as a result of the excursion; and
- update school records where necessary.

The information will only be accessed by authorised departmental staff. The information will not be disclosed to any other person or agency unless we have your consent or we are required or authorised by law to do so e.g. in compliance with relevant Queensland Chief Health Officer's Directions.

**Activity risks and insurance**

The Department of Education does not have personal accident insurance cover for children/students. If a child/student is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If the parent/carer has private health insurance, some costs may also be covered by your provider. Any other costs must be covered by the parent/carer. It is up to the parent/carer to decide the type/s and level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow the child/student to participate in this activity.

**Consent**

By signing this form, I agree to all the following statements:

- I have read all of the information contained in this form in relation to the excursion (including any attached material)
- I am aware that the department does not have personal accident insurance cover for children/students.
- I give consent for the named child/student, to participate in the identified excursion.
- I will pay to the school the costs detailed in this consent form for the child/student's participation in the excursion.
- I agree to and understand the refund policy as it applies to this excursion (see Excursion costs)
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment the child/student may reasonably require, including contacting their doctor.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school with all relevant details of the child/student's medical or physical needs on registration/enrolment and where relevant have updated this information.
- I give consent for child/student contact information to be shared in relation to this excursion in compliance with relevant Queensland Chief Health Officer's Directions.

Parent/Carer	Name:		
	Phone number:		
	Email address:		
	Signature:		Date:

**Additional medical information**

The school collected medical information about your child at registration/enrolment. This information is stored electronically in OneSchool. Please give full details of any new or updated medical information which may affect your child's full participation in the excursion described in the form.

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