

Year 3/4 Excursion to Scienceworks

30th October 2015

Dear Parent/Guardian,

As part of our Science-based Inquiry unit, 'Curiosity' and our study of the solar system, the Year 3 and 4 students will be visiting Scienceworks later this term. They will experience a special presentation titled 'Earth, Moon and Sun', which uses audiovisual equipment and interactive demonstrations to explain how the Earth's rotation on its axis affects the day and night cycle, why we see the phases of the Moon and why we have seasons on Earth. In addition, students will watch a Planetarium animation titled 'Tilt', which will further help explain our four seasons.



Date: Friday 27th November

Venue: Scienceworks (Spotswood)

Time: Buses will depart from Sussex Heights Primary school at 9:00am sharp. Students must arrive no later than **8:45am**. They will return to school for the normal dismissal time of 3:30pm.

Students will be travelling by bus (with seatbelts) to the museum and will be supervised by Sussex Heights Primary School staff and parent helpers with a *Working with Children Check*. If you would like to assist on this excursion, please contact your child's teacher.

For the excursion, students will need to wear school uniform (including a sun smart hat) and bring a packed snack (with fruit), lunch (no glass please) and water bottle in a **small backpack** labeled with their name.

Students must arrive at school no later than 8:45am.

Please fill out and sign the attached **Permission/Medical Form** and return it to your child's teacher no later than **Friday November 13th**.

Year 3/4 Drama Toolbox Incursion

Next **Friday November 6th**, students in Years 3 and 4 will participate in a fantastic Drama incursion, 'What Planet Are You On?', courtesy of the team at The Drama Toolbox. In a similar fashion to our Design, Creativity and Technology Project, students will be working for NASA to gather facts and data about the planets in our solar system. They will engage in a variety of activities with slow motion, mime, freeze frame and improvisation.

We look forward to these rich and engaging learning experiences!

Brad Arundale and Natalie Peacock
Year 3/4 Teachers

Year 3/4 Excursion to Scienceworks- Permission/Medical Form

TITLE: Year 3/4 Scienceworks Excursion

DATE: 27th November 2015

I give permission for my child to travel by **bus** to **Scienceworks** on **27th November 2015**. I authorise the teacher in charge of the excursion to consent, where it is impractical to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary. I understand that the Department of Early Childhood Education & Development (DEECD) does not provide student accident cover insurance.

Student's Full Name: _____ **Class:** _____ **Date of Birth** ____/____/____

PLEASE TICK IF YOUR CHILD SUFFERS ANY OF THE FOLLOWING:

Fits of any type <input type="checkbox"/>	Blackouts <input type="checkbox"/>	Travel Sickness <input type="checkbox"/>	Dizziness <input type="checkbox"/>
Migraines <input type="checkbox"/>	Asthma <input type="checkbox"/> (If your child has asthma, regardless of the frequency, a copy of a current asthma plan must be attached. Ventolin, or other prescribed medication, must be carried by your child or staff on this excursion.)	Allergy (e.g. bee/wasp, nuts, Penicillin, other) <input type="checkbox"/> Allergic to: _____ Epipen: Y <input type="checkbox"/> N <input type="checkbox"/>	
Other <input type="checkbox"/> please specify: _____			

NB: Please ensure the school has a current Asthma Management Plan or Anaphylaxis Plan. (If applicable)

Special care is recommended: _____

Is your child currently taking any medications? Yes / No

If yes, please state the name of and dosage of medications: _____

Emergency name: _____ Emergency contact number on the day: _____

Emergency Contacts are people that Sussex Primary School may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Sussex Heights Primary School.

Parent's Name: _____ **Signature:** _____ **Date:** _____

This confidential form asks for personal information about your child. The main purpose for collecting this information is so that Sussex Heights Primary School can allocate staff for supervision and it assists us to properly care for your child. The school depends on you to provide all relevant health information. Withholding some health information may put your child's health at risk. The school will use this information if your child is involved in a medical emergency. This medical form must be current when the excursion is run. Parents are responsible for all medical costs if a student is injured on a school approved excursion unless the Department of Education and Early Childhood Development is found liable (liability is not automatic). Parents can purchase student accident insurance cover from a commercial insurer if they wish to. All staff at Sussex Heights Primary School and the Department of Education & Early Childhood Development are required by law to protect the information provided on this form. All information is held in confidence.