



WERRINGTON PUBLIC SCHOOL

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9th June 2021

Stage Two Excursion

Dear Parents/Caregivers,

Students from Year Three and Four will be attending an excursion to Sydney Zoo in Week 5, Term 3 on Wednesday 11th August 2021.

The excursion has been planned to support the curriculum. The excursion is called "Orangutan Survival" which is an engaging, authentic and tactile outdoor adventure, exploring different animal characteristics, habitats and management of environments both in Australia and Indonesia. We will look into the world of Orangutans and find out what we can do to ensure their survival in the wild.

The cost of the excursion is \$27.00 per child. The students will depart Werrington Public School at **9:00am sharp** and return at approximately 3.00pm. Travel will be by bus. Please meet at the COLA at **8:30am** in order to ensure we can mark the roll and leave on time.

Students will need to wear full school uniform and bring the following items on the day:-

- **Recess and lunch** as there is no opportunity to purchase food or drink. *Clearly label* bags with your child's name. Please pack resealable water bottles only. As we are at an environmental centre, they have requested we minimise rubbish by packing food in reusable containers.
- A school hat and school jacket.

The group will be supervised by classroom teachers and SLSOs throughout the day.

Please return the form and payment prior to Friday 6th August, 2021. No late payments can be accepted. If you require additional time, please see Mrs Mallia in the office to arrange an alternative payment plan.

Mrs Enese
Coordinator

Mrs Avery
Principal

PERMISSION SLIP – Sydney Zoo

I give permission for my child _____ in class _____, to participate in the stage 2 excursion on Wednesday 11th August at 700 Great Western Highway, Bungarribee NSW.

Signed: _____

Date: _____

Parent

Please indicate:

I have enclosed cash for the amount of \$27.00 **or**

I have made an Online payment. My receipt number is _____ Date: _____

Emergency contact phone numbers: 1. Name: Number:

2. Name: Number:

List existing medical conditions or illnesses (include asthma, diabetes, epilepsy, allergies and previous sporting injuries etc.)
Outline the treatment for each:

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Medication(s) to be administered during the excursion. Include the name of the medication, instructions for administration, time of administration and any possible reactions:

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