# **NORDS WHARF PUBLIC SCHOOL**

Phone: (02) 4976 1257 Email: nordswharf-p.school@det.nsw.edu.au



14 May 2024

#### **Stage 2 Zoo Snooze Overnight Excursion**

Dear Parent/Carer,

Years 3 and 4 will be attending Sydney for a one-night, two-day overnight Zoo Snooze excursion. Zoo Snooze is a wonderful opportunity for Year 3 and 4 students to spend a night at Taronga Zoo. It is a chance for classes to combine environmental education, team building and fun through a safe and unforgettable program.

All accommodation, amenities and associated facilities are clean, comfortable and well maintained. The programs are fully catered with ample availability of nutritious and tasty food; special dietary requirements can be accommodated.

To ensure that you have all the information you need about your child's Zoo Snooze overnight excursion, there will be a parent information session (late Term 2, date to be advised) where you can learn about the activities, safety measures, and expectations for your child during the trip.

When: Monday 14 October to Tuesday 15 October 2024 (Term 4, Week 1).

Where: Sydney Taronga Zoo.

Time: Students will be required to be at school at 8:00am Monday morning for an

8:30am departure. We will return to school approximately 5:00pm Tuesday

afternoon.

Transport: Air-conditioned, seat belt equipped coach and driver.

Accommodation: 1 night, 2 days at Taronga Zoo.

Staff: Mrs Skinner, Mrs Bear and Mrs Pead.

The final cost of the excursion has been calculated at \$363. This will show in Sentral as \$352 'Camp' and \$11 'Food Camp'. If numbers fall below the quoted number of students, a variation to this price may result. The excursion can be paid in instalments or as a bulk amount.

The payment schedule for the camp is below:

	Amount	Due Date		
Deposit	\$75	Wednesday, 29 May (non-refundable – extenuating		
		circumstances only will be considered)		
2 <sup>nd</sup> instalment	\$50	Wednesday, 12 June		
3 <sup>rd</sup> instalment	\$50	Wednesday, 26 June		
4 <sup>th</sup> instalment	\$50	Wednesday, 24 July		
5 <sup>th</sup> instalment	\$50	Wednesday, 7 August		
6 <sup>th</sup> instalment	\$50	Wednesday, 21 August		
Final payment	TBC	Wednesday, 4 September		
Please note the excursion must be paid in full by Wednesday 4 September 2024 or your child can not attend.				

If you have any questions regarding camp or would like to discuss an alternate payment scheme, please contact the school office.

We look forward to attending this wonderful Stage 2 overnight excursion with your child.

Mr Wlodarczyk 3-6 Assistant Principal Mrs Megan Neilands Principal

## **STAGE 2 – Zoo Snooze Overnight Excursion**

### Monday 14 October to Tuesday 15 October 2024

(Return Permission Slip to NWPS Office by Wednesday 29 May 2024)

I give p	permission for my child	of class
to atter	nd the Stage 2 overnight Zoo Snooze excursion to Taror	ga Zoo.
Please	tick the following:	
	Please find enclosed my non-refundable deposit on o	f \$75.00
OR		
	I have paid the non-refundable deposit online and m	y receipt number is:
OR		
	I have paid the full amount online and my receipt nu	mber is:
AND		
	I understand that this payment in non-refundable	
	I understand the cost attached to this note is only an change upon final numbers	approximate and may
OR		
My child		of class
<b>will NO</b> Zoo.	<b>OT be attending</b> the Stage 2 overnight Zoo Snooze excu	rsion to Sydney's Taronga
Name d	of Parent/Carer Signed: _ (Please Print)	

#### **STAGE 2 2024 Zoo Snooze Excursion Medical Form**

#### STUDENT DETAILS

Surname	Gender	M / F
Given Name/s	Date of Birth	/ /
Address		

Does your son/daughter suffer any chronic illness, or disability?	Y / N	
If yes please specify:		
Does your son/daughter need to take any form of medication on the Zoo Snooze Excursion?	Y / N	
If yes please specify: (name, dose, frequency etc)		
Does the medication need refrigeration?	Y / N	
Has your son/daughter suffered from an acute illness in the pa 4 months?	Y / N	
If yes, please specify:		
Has your son/daughter had any major surgery (knee, back, heart, etc)?	Y / N	
If yes, please specify:		
Has your son/daughter been treated by a doctor within the las 4 weeks?	st Y/N	
If yes, is there any additional information we might need?		
Does your son/daughter have any allergies (insects, food, medication, etc)?	Y / N	
If yes, please specify: (symptoms and treatment)		
Does your son/daughter have any special dietary requirements	ts? Y/N	

Y / N				
Y / N				
Y / N				
Additional Information:				
Can you please return the Stage 2				
In the event of any accident and I am unable to be contacted, I authorise the obtaining of such medical assistance that my son/daughter may require. I also agree to cover medical fees and/or cost of such assistance that may be incurred while my son/daughter is on the Stage 2 Zoo Snooze Excursion on Monday 14 <sup>th</sup> October to Tuesday 15 <sup>th</sup> October 2024.				

Parent / Carer: \_\_\_\_\_\_ Date: \_\_\_\_\_