



September 2019

### K-2 Excursion to Blackbutt Reserve

Dear Parent/Caregiver,

Students in Kindergarten, Year 1 and Year 2 will participate in an excursion to Blackbutt Reserve, Kotara on Friday, 18 October 2019. This excursion compliments our Science and Technology and Geography units of work. Students will need to be at school by **9:15am** for a 9:30am departure and will return to school by 3pm.

**Transport will be by coach.**

The cost of this excursion will be **\$18.00 per student.**

**Permission notes and money** need to be returned to the school by **Wednesday, 25 September.**

**Supervisors** will be Mrs Black, Ms Hook, Miss Dunlop and Mrs Halligan.

**Requirements:** Students must wear full school uniform (including a hat and covered footwear) and bring their fruit break, recess, lunch and a water bottle.

**Additional information:** Parent helpers are welcome to attend and help supervise, but will need to make their own way to and from Blackbutt Reserve. Parent helpers will need to have completed a Department of Education Working with Children Check (appendix 5) and provide 100 points identification prior to the excursion. Please contact the school office for more information. Due to the activities planned, it is not suitable for non-school age children to attend with accompanying parents.

Donna Black  
Organising Teacher

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Nords Wharf Public School

### Permission Note for Blackbutt Reserve K-2 Excursion

*Return note and money to the office by **Wednesday, 25 September 2019.** Each child needs a separate note.*

I give my permission for my son/daughter \_\_\_\_\_ in class \_\_\_\_\_ to participate in the excursion to Blackbutt Reserve on Friday, 18 October 2019, leaving school at 9:30am and returning by 3.00 pm. I understand my child needs to be at school no later than 9:15am to be marked off the role and settled on the bus.

I enclose \$18 as payment for this excursion.

I am able to be a parent helper on the day and understand I need to make my own way to Blackbutt Reserve.

\_\_\_\_\_  
Parent/Caregiver name and signature

\_\_\_\_\_  
Date