



Illaroo Road Public School

103 Illaroo Road
PO Box 3346

North Nowra 2541

Ph: (02) 4421 0422

(Fax: (02) 4423 2728

Dear parent or caregiver,

Year 5 will be going on an excursion to Berry Sport & Recreation Centre on Wednesday 13 March to Friday 15 March, 2019.

This excursion has been planned to supplement the following work being done in the classroom: PDHPE.

The cost of the excursion is \$290.00. Part payments will be accepted this year and full payment will be required by Term 1 Week 5, 2019.

Transport to and from Berry Sport & Recreation Centre will be by bus.

The staff members accompanying the students will have emergency care and CPR certification.

Overnight excursion – advice

Accommodation will be at Berry Sport & Recreation Centre, 660 Coolangatta Road, Berry, NSW 2535
Travel will be by bus with Shoalbus.

The group will be supervised by the teachers accompanying the students.

What to wear: Day 1 – Sleeved T-shirt, shorts, socks, joggers, hat.
Day 2 – Sleeved T-shirt, shorts, socks, joggers, hat.
Day 3 – Sleeved T-shirt, shorts, socks, joggers, hat.

Food: Day 1 – Meals provided
Day 2 – Meals provided
Day 3 – Meals provided

Water or swimming activities – advice

The excursion will involve the following water or swimming activities: canoeing and swimming.

These activities will take place at: Berry Sport & Recreation Centre.

The centre will provide the following flotation devices to students who may require assistance in the water: life jackets.

This excursion has been approved by the Principal.

Mrs Anne Winkler
Excursion Coordinator
3 September 2018

**Illaroo Road Public School
PERMISSION NOTE**

Berry Sport & Recreation Centre

I hereby consent to my son/daughter/ward (full name) _____ class _____ participating in the excursion to Berry Sport & Recreation Centre at 660 Coolangatta Road, Berry on Wednesday 13th March to Friday 15th March, 2019. Travel will be by bus.

My son/daughter has the following special needs (please provide full details and include any relevant medical details).

I understand that by signing this note I give permission for my child to receive medical treatment in case of emergency.

Overnight excursion – response

I understand that my son/daughter will stay overnight at Berry Sport & Recreation Centre.

Water or swimming activities – response

In relation to the proposed water or swimming activities, I advise that my child is a: *(please tick one)*

<input type="checkbox"/> strong swimmer	<input type="checkbox"/> average swimmer	<input type="checkbox"/> poor swimmer	<input type="checkbox"/> non-swimmer
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I advise that my child requires the following flotation device to assist him/her in the water:

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I will provide this device so that my child can participate in the excursion. Yes / No

I give / do not give permission for my child to participate in the water or swimming activities.

Signature of parent/guardian: _____ Date: _____

Prior to the camp you will be sent instructions for the online collection of information relating to medical, dietary and other special needs for your child.

SIGN AND RETURN TO CLASS TEACHER BY FRIDAY 30TH NOVEMBER, 2018.