



Blackwell Public School

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Dear Parents/Caregiver,

9th May 2018

On Tuesday 19th June, Kindergarten will be going on an excursion to Calmsley Hill Farm at Abbotsbury. This excursion is linked to our Farm unit of work that is being completed this term. The students will experience hands on activities with animals as well as enjoying a working dog show, watching a sheep shearing demonstration and even a tractor ride around the farm.

Some important information:

- The cost per student is \$35 – this includes farm entry, tractor ride and bus fare.
- Please ensure your child **arrives at school by 8:50am** to have their name marked off in their classroom. **The bus will leave at 9:05am.**
- School uniform is to be worn. Children **MUST WEAR THEIR SCHOOL HAT** and sunscreen.
- Students will need to bring enough food and drink for recess and lunch. These are to be brought in their **regular school bag**. Please ensure the bag is **clearly labelled** with your child's name.
- Refunds – please note that in the case of absence, bus fare is not refundable.
- Financial assistance is available for families in need. Please contact the office if this is required.
- Please fill in the slip below and return with payment by **Friday 8th June**.
- **We aim to return to school before the 3:00pm bell to dismiss students from their classrooms as normal. In the event that we return to school after the bell (dependent on traffic), please note that all students will be permitted to accompany their teacher to the Kinder C.O.L.A area for dismissal.**

We are all looking forward to a great day!
Kindergarten Teachers

Mrs Jo Turnbull
Organising Teacher

Mrs K Hudswell
Principal

2018 KINDERGARTEN FARM EXCURSION

I give permission for my child _____ of class _____
to attend Calmsley Hill Farm on Tuesday 19th June.

Enclosed is payment of \$35.

Special needs of my child which you should be aware (e.g. asthma, allergies, medication).

To the best of my knowledge he / she has no medical condition, disability or injury which puts him / her at risk in participating in the excursion.

In the event of illness or injury, I authorise the seeking of such medical assistance on my behalf that my child may require.

Medicare Number - _____ (for use at medical centres etc)

Contact number - Work _____ Home _____

Signature _____ Date _____