WOODCRAFT GUILD





Dear Parents and Carers,

A small group of students have the opportunity to participate in Woodcraft Guild sessions where they will learn woodworking skills and make a range of woodcraft projects. These sessions are facilitated by volunteer members of the ACT Woodcraft Guild who share their significant expertise. The staff member in charge of this event will be Tilla Beech.

The completed permission note should be returned to the front office by Thursday 15th July.

IMPORTANT INFORMATION:

Venue: ACT Woodcraft Guild

Date: Thursdays (Terms 3 & 4) beginning 15th July

Time: 12-2.30pm
Transport: Staff vehicle

Cost: \$20 (\$0.00 Staffing; \$20 Entry; \$0.00 Transport)

Food: Students need to bring food and drinks for morning tea and lunch. Water bottles can be refilled

Clothing: Wear school uniform

Group Size: 4 students

Contingency: If for any reason we can not attend students will remain at school in classes.

Excursion Risk Assessment: Available at the front office

Wanniassa school's front office can relay messages to staff and students on the excursion. During school hours, contact the front office and speak directly with staff. After hours, call the front office and leave a detailed message. Messages are checked regularly (until 10pm each night and after 6am).

The school has made every effort to keep costs for this activity at a reasonable level. The school has an equity fund, which can be used to provide financial assistance for students to ensure full access to the school curriculum. However, if there is insufficient total funding available to meet the cost of the camp/excursion, regrettably we may not be able to proceed. Please contact the business manager or principal via the front office to discuss further.

Withdrawing from this excursion with less than 3 school days notices requires a medical certificate for a refund to be granted.

If you have any questions regarding this excursion, please contact Jo Lambert on 61421870 or emai joanna.lambert@ed.act.edu.au

Regards
Jo Lambert
Learning Support
Wanniassa School
15/6/21



Wanniassa School P-6 Campus: Sternberg Crescent 7-10 Campus: Wheeler Crescent WANNIASSA ACT 2903





I give permission for my child Woodcraft Guild on Thursdays from 15 th July, trav			attend the excursion details as outlined			
I agree to my child participating in the activities associated with this excursion mentioned previously. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this excursion.						
I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.						
The Medical Information and consent form only needs to be completed once/year prior to the first excursion unless there are changes to the details on this form. Are there any changes to this form?						
Yes No No						
If yes, an updated Medical Information and Consent Form is required to be completed (available through the front office).						
Will your child require medication to be administered during the excursion (e.g. allergy medication, pain relief)?						
Yes No No						
If yes, please complete a Medication Authorisation and Administration Record (available through the front office).						
Is there any additional information you need to provide to support your child's participation in this excursion?						
Yes No No						
If yes, please provide these details						
Please provide the following information:						
Medicare No: Private Hea	lth Fund:		Membership No			
Ambulance Fund: Parents are responsible for ambulance costs outside the ACT.						
Name of Parent/Carer: (please print)						
Signature:Date:						

^{**}If a Student's medical condition has changed a new Medical Consent form must be completed. The form is available on the website in the "Our School - Excursions" section.





PAYMENT SLIP DUE: INSERT PAYMENT DAY AND DATE

Student Name:		Year :	Amount Paid \$
Date Paid:	Receipt Number:		
Payment Options			
To pay online by credit card	d please go to the school	l website (<u>http://w</u> i	ww.wans.act.edu.au) and click on
"Payments". Pay using the	link to the QuickWeb sy:	stem. Fee Code: wo	OODCRAFT

Payments can also be made in person at the front office with cash, credit card or EFTPOS.