



MACQUARIE PRIMARY SCHOOL
Years P – 6

46 Bennelong Crescent MACQUARIE ACT 2614

Phone 6142 1550

Fax 6142 1571

www.macquarieps.act.edu.au

Email admin@macquarieps.act.edu.au

ABN: 66 296 876 753



2 March 2020

Bush Tucker Netball Gala Day

Dear Families,

Your child has been selected to represent the school at the Belconnen region netball gala day. A risk assessment has been completed and is available to view at the front office.

Where: Belconnen Netball Association, Lhotsky Street, Charnwood, ACT 2615

When: Friday 20 March

Transport: Families to organise drop off and pick up

Time: 8.45am to 2.45pm

Accompanying Staff: Ross Dennis

**Emergency Contact
number on excursion:** 0434 751 607

Cost: \$5.00 This covers the cost of team registration

Staff accompanying students on excursions will take all reasonable care while the students are in their care to protect them from injury. Parents should be aware that staff members are not responsible for injuries or damage to property that may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour. (Education Directorate Policy)

As this is an optional activity to enrich curriculum outcomes, a payment will be required to cover the costs. If the school is unable to cover the costs, the school may not be able to provide this activity. Individual records of contributions are confidential.

Students will need to bring/wear:

- water bottle
- fully enclosed running shoes and warm clothes to wear between games
- recess and lunch

Please return permission note and payments by **Friday 13 March**.

Kind regards,

Ross Dennis

Permission Note for *Bush Tucker Netball Gala Day*

I give permission for my child _____ from
class _____ to attend this excursion on **Friday 20 March**

- I understand the transport arrangements involved.
- I confirm there have been no changes to my child’s medical information and I understand it is my responsibility to inform the school if changes occur.

Parent Contact Information - If needed during the excursion

Parent/Carer Name:	Contact Number:
Parent/Carer Name:	Contact Number:
Parent Signature:	Date:

Payment Slip for *Bush Tucker Netball Gala Day*

Payment due date : **Friday 13 March**

Student Name: _____ **Class:** _____

- I enclose \$5.00 cash/cheque or
- I have paid \$5.00 via electronic funds transfer

EFT Details	
Account Name:	Macquarie Primary School Management Account
BSB Number:	032 777
Account Number:	001586
Use reference:	<i>Child’s Name</i> NETBALL

- I have paid \$5.00 via Quickweb - found under the payment tab on our school website

Quickweb Details:	
Go to our school website and follow the prompts on the payment page	
Use reference:	<i>Child’s Name</i> NETBALL

The Directorate collects the information contained in this form to obtain parental consent for students’ participation and to provide or arrange first aid and other medical treatments for students. The information collected will be held at the student’s school and will be made available to relevant school staff, including first aid officers, and to medical or paramedical staff in the case of an accident or emergency. The information contained in the form is personal information and it will be stored, used and disclosed in accordance with the requirements of the *Information Privacy Act 2014* and the *Health Records (Privacy and Access) Act 1997*.