Dear Parents,

This term in Unit, the school has a history focus of “Looking Back to Look Forward”. In Grade 3 we are learning about celebrations and why we remember significant events of the past. In order to give the students a better understanding of this concept we have organised an excursion to the Jewish Museum and The Shrine of Remembrance. Details for the excursion are as follow:

**When:** Thursday 14th August

**Where:** Jewish Museum and Shrine of Remembrance

**Cost:** $15:00 – *(This excursion has been partially subsidised by the school)*

**Uniform:** Students are to wear full school winter uniform. *(Not sports uniform)*

**Food:** Students are to bring their lunch and snack in disposable containers for example a brown paper bag clearly labelled would be ideal. Disposable drinks such as poppers etc are also encouraged.

At the Jewish Museum the children will be participating in a Passover meal and will be offered food to taste. This meal will consist of grated apple with cinnamon, grape juice, celery, unleavened bread and parsley in salt water. Please fill in the enclosed permission slip informing us of any allergies your child may have and if they will be participating in the food tasting experience.

Of course an excursion such as this will not be possible without your assistance. If you would like to help and have a valid ‘Working With Children Check” certification, which has been registered at the school office, please indicate on the attached form and your child’s class teacher will contact you. Because of the responsibility involved in supervising a group of children, you will not be able to bring along pre-schoolers and we are unable to accommodate any extra persons due to limited space on the buses. Please note, also, that all parents assisting with this excursion will **be required to attend a compulsory briefing session on Wednesday the 13th August in the 3A classroom at 3:15pm.**

In order to confirm numbers etc we ask that all permission forms and monies be return to school by Friday the 8th of August.

Kind Regards

Grade 3 Teachers
I give permission for my child ____________________ to attend the Grade 3 excursion to the Jewish Museum and The Shrine of Remembrance.

I understand that my child will be travelling to and from the Jewish Museum and Shrine of Remembrance by bus.

Emergency contact number for the day is ____________

Where I am unable to be contacted or it is otherwise impracticable for me to be contacted, I authorise the teacher in charge of the excursion to:

- Consent to ____________________________ (child's name) receiving such medical or surgical assistance as is recommended by a medical practitioner in the event of any illness or accident.
- Administer or consent to such first aid as the teacher in charge of the excursion may consider being reasonably necessary in the event of illness or accident.
- I accept all risks involved in the administration of medical, surgical or first aid treatment considered necessary and the responsibility for the payment of all expenses incurred in relation to such treatment and any emergency transportation required.
- I also accept that my child may be returned home early from the excursion or activity in the event of serious misbehaviour and that any cost associated with this will be met by me.

PASSEOVER MEAL TASTING

My child will/will not be participating in the Passover Meal tasting.

Please provide details of any medical conditions or food allergies.

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

PARENTAL ASSISTANCE

☐ I ___________________________ am able to assist on this excursion and understand that I will be required to attend a compulsory briefing at least two days prior to the excursion.

☐ I, ___________________________ have a valid ‘Working With Children Check’ Certification Card.

Signed: _______________________

Date: _________________________