

## IN SCHOOL ACTIVITY PERMISSION NOTE

Dear Parents

The following in school activity has been organised and it would be appreciated if you would read the contents carefully.

|  |   |                        |                       |
|--|---|------------------------|-----------------------|
| <b>ACTIVITY:</b>   | West Oz Wildlife  |                        |                       |
| <b>Venue:</b>  | Shelley Primary School  |                        |                       |
| <b>Classes attending:</b>  | <b>Pre-Primary classes</b> Rooms 14 and 15  |                        |                       |
| <b>Date of in school activity</b>  | Monday 31 March 2025  |                        |                       |
| <b>Purpose of In School Activity:</b>  | Students will be learning about Native Australian Animals.<br>This in school activity is a fantastic opportunity for our students to meet, touch and learn about our Australian native animals. |                        |                       |
| <b>Teacher in charge:</b>  | Mrs Nicky Richards and Mrs Julie Wynn   |                        |                       |
| <b>Cost per student:</b>   | <b>\$13.00</b>  | <b>Payment due by:</b> | Tuesday 25 March 2025 |
| <b>Requirements:<br/>(eg Lunch, Uniform, etc)</b>  | N/A   |                        |                       |
| <b>Students will not be entitled to a refund if they are unable to attend the in school activity as the school must book in advance.</b> |   |                        |                       |

ORGANISING TEACHERS:

Mrs Nicky Richards & Mrs Julie Wynn  
12 March 2025



**IN SCHOOL ACTIVITY: West Oz Wildlife    COST: \$13.00 per student  
PAYMENT DUE BY: Tuesday 25 March 2025**

STUDENT FIRST NAME: \_\_\_\_\_ STUDENT SURNAME: \_\_\_\_\_ ROOM NO. \_\_\_\_\_

**Payment Options:**

- **QKR** This is *our preferred method* of receiving *payments* for all school transactions.

If paying by Qkr the permission form is submitted through the app - you do not need to return this form to the office.

- **EFTPOS** – *Payment can be made at the front office*
- **DEDUCT** - Please deduct from student account (only applies if you have made a pre-payment)

**If payment and permission have not been received by the payment due date your child will not be able to attend.**

*I consent to my son/daughter participating in the above In School Activity. Where it is not practical to communicate with me, I authorise the teacher in charge of the in-school activity to obtain such medical treatment for my child as may be considered necessary. I am aware that the Department of Education insurance does not cover personal accidents through misadventure nor loss or damage of personal belongings.*

**Does your child have any allergies to animals:    Yes     No**

Signed \_\_\_\_\_ (Parent / Guardian)                      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_