

September 2011

Dear Year 2 Parents

It is very exciting that we will be conducting a Year 2 Sleepover as part of the Junior School Study Tour Program. This is an excellent way of introducing our students to a 'camping experience'.

Children need to be at school normal time on Thursday, 20 October. We will be departing at 10.00 am sharp for The Melbourne Aquarium. Teachers attending this excursion will be Mrs Balfour, Mrs Wigg, Mrs Pike, Mrs Gilbert, Miss Collins and Mrs Cook. These staff members will assist us in running the sleepover.

Children will be required to bring morning and afternoon tea and two drinks in a disposable bag on Thursday (lunch will be provided by the Aquarium). We will be visiting the Aquarium Gift Shop and your child will have the opportunity to purchase a small item to the value of \$5. Please put this money in a named envelope and send it to school with the permission forms required. Children will wear **casual clothes** for the sleepover (see attached clothing list).

All meals on Thursday night and Friday will be provided. Dinner on Thursday night will be served at School.

We will be sleeping in the Year 2 classrooms on Thursday night, therefore, students will need a **sleeping bag, sleeping mat, lilo or blow up mattress to sleep on**. As luggage space will be restricted it is important that an overnight bag be used – not a large suitcase.

On Friday, we will be visiting the **Mushroom Reef in Flinders**, followed by a BBQ lunch and fishing at Flinders Beach. The children will be dismissed at School at normal time (3.25pm).

Any **medication** required by your child should be marked clearly with name and written directions and handed to your child's teacher by Wednesday 19 October in a 'clip seal' bag.

All medical forms must be returned to your child's teacher by Wednesday 12 October.

If you have any queries do not hesitate to see us.

Yours sincerely

LEE-ANNE WIGG
Year 2A Teacher

MELINDA BALFOUR
Year 2B Teacher

YEAR 2 SLEEPOVER

THURSDAY 20 October – FRIDAY 21 October 2011

Year 2 Information and Clothing Requirements

WHEN: Thursday 20 October to Friday 21 October 2011

BRING: For Thursday 20 October only:
Morning tea and afternoon tea
(with at least two drinks or a refillable drink bottle)

EMERGENCY CONTACT

- 8:00am – 4:00pm Cheryl Shotton -Junior School Office 9788 7800
- After Hours - ***for emergency contact only please*** contact numbers for classrooms: Lee-Anne Wigg (9788 7889) or Melinda Balfour (9788 7837)

RETURN: Medical form by Wednesday 12 October.

Medication in a labelled 'clip seal' bag by Wednesday 19 October.

BRING THESE ITEMS – (all items should be clearly named)

<ul style="list-style-type: none">• Wear one set of casual clothes	
<ul style="list-style-type: none">• Pack one set of casual clothes (incl spare pair shoes)	<ul style="list-style-type: none">• PJs
<ul style="list-style-type: none">• Rain jacket/slicker	<ul style="list-style-type: none">• Special friend- teddy. No other toys please.
<ul style="list-style-type: none">• Sleeping bag, pillow and mat	<ul style="list-style-type: none">• School Hat and sunscreen
<ul style="list-style-type: none">• Toilet bag incl soap, facewisher, toothbrush, toothpaste, hairbrush.	
<ul style="list-style-type: none">• Clean underwear	

NO LOLLIES OR JUNK FOOD PLEASE.



Excursion Record – Form 3B v6

1 Excursion Information

Student's Name:
Year Level:
Name of Excursion: Year 2 Sleepover – TPS (includes visit to Melb Aquarium & Flinders Beach)
Date of Excursion: Thursday 20 & Friday 21 October 2011

The cost, if applicable, will be added to your Bookroom account.

2 Student Medical Information

Parent/Guardian's full name:
Address:
Postcode:
Mobile telephone number:
Bus:
Hm:
Preferred emergency contact no:
Family doctor:
Tel:
Student's date of birth:
Medicare #:
Medical/Hospital insurance fund:
Ambulance #:
Tetanus immunisation/booster:

Table with 6 columns: Condition, checkbox, Condition, checkbox, Condition, checkbox. Rows include Asthma, Travel Sickness, Heart Condition, Blackouts, Migraine, Fits, Bed Wetting, Sleep Walking, Epilepsy, Diabetes, Allergies, Medication Allergy, Other Conditions.

Please specify other conditions:
Please note: if your child suffers from any serious condition, such as diabetes or epilepsy, then a management plan must be attached

If your child has a diagnosed risk of anaphylaxis please complete an Anaphylaxis Management Plan with your medical practitioner and attach to this form. (This is a legislated requirement for schools.)
Anaphylaxis & Asthma Plans may be downloaded from our website http://www.tps.vic.edu.au/pages/Parents_EForm.htm.

Please note: If a plan is required, it must be submitted every time you send in this Excursion Form

3 Student Medication Details

Name of medication:
Date medication commenced:
Dosage:
Time/s of day medication is to be taken:
Original container sighted: YES NO

The prescribed medication must be seen by the School Nurse in the packaging/container in which the pharmacist dispensed it

School Nurse signature:

4 Consent For Medical Attention

Table with 3 columns: Question, YES NO, Date/Signature. Questions (A-E) regarding permission for school camp, medication, analgesics, first aid, and emergency treatment.