

ANZAC DAY STUDENT CEREMONY YEAR 6 EXCURSION

Dear Parent/Guardian,

As part of our history component, we have planned an excursion to the ANZAC Day Student ceremony held at the Shrine of Remembrance on **Friday 20th April** from **9:00am until 3:15pm**. The history component of your child's report assesses their knowledge and understandings of significant events in Australian history such as World War I. Students are also required to use a range of primary and secondary resources to investigate the past. Students will be completing a range of activities in class to further support this experience and develop their understandings.

Each year prior to ANZAC Day, Legacy holds a special service for school students. This service combines education with commemoration and is attended by thousands of schoolchildren annually. The first service was held in 1932 - three years before the Shrine was opened. After the special service, we will be visiting the Shrine as well as the surrounding gardens and attractions.

As this will be a full day excursion, each child will be required to bring their snack, lunch, drink and their hat in a small backpack for which they will be responsible throughout the day.

As the children will not have the opportunity to visit any shops, no money is to be brought on the day.

Cost: \$10.00

The completed permission form and money must be returned to school by Wednesday 28th March. Please note that payments will NOT be accepted after this date.

Year 6 Team



YEAR 6 ANZAC EXCURSION - PERMISSION FORM

I give permission for my child _____ in Class _____

to participate in the ANZAC Day Student Ceremony excursion on **Friday 20th April, 2018**.

This activity entails the booking of transport and/or other expenses of a fixed nature. Once payment has been made, any child withdrawing from this activity will only be reimbursed for charges that the school can withhold such as admission charges.

I authorise the teacher in charge, where impracticable to communicate with me, to the child's receiving such medical and/or surgical treatment as may be necessary and I will be responsible for any costs arising from such treatments.

SIGNED _____

DATE _____

(PARENT/GUARDIAN)

PARENT/GUARDIAN Emergency Contact Number: _____

PAYMENT OPTIONS:

Qkr! App

Pre-paid Excursion Levy

Camps, Sports & Excursions Fund (CSEF)

Enclosed payment of \$10

PARENT VOLUNTEER FORM - YEAR 6 ANZAC EXCURSION

Parents willing to assist with this excursion are required to have a current "**Working with Children Check**". The application form can be obtained online at www.workingwithchildren.vic.gov.au/home/applications/.

Child's Name: _____

Class: _____

Parent/Guardian Name: _____

Contact Number: _____

Parent/Guardian Signature: _____

Date of Excursion: **20th April, 2018**

Once obtained, please provide your child's teacher and the school office with a copy of your Working with Children card.