



### Year 1 at Woden Valley Gymnastics Club

<b>COST</b>	\$10.00	Cost covers:	Travel <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/>	Program <input checked="" type="checkbox"/>	Other <input type="checkbox"/>
<b>Event Dates:</b>	Thursday 5 <sup>th</sup> , 12 <sup>th</sup> and 19 <sup>th</sup> of September		<b>Event Times:</b> 1KV + 1BB 12:00 till 12:45 1MS + 1HC 1:30 till 2:15			
<b>Event Location:</b>	Woden Valley Gymnastics Club - 27 Mulley Street, Weston Creek ACT 2611					
<b>Transport:</b>	Travelling in chartered bus (QCity)					
<b>Purpose:</b>	Year 1 students at Charles Weston School will be visiting the Woden Valley Gymnastics Club in order to further develop their strength, coordination, balance and body awareness.					
<b>Teacher(s):</b>	Mr Mark Stephens, Miss Kaitlin Van Den Engel, Mrs Helen Crane, Mrs Tamarah Barden					
<b>Additional Information:</b>	Students are to wear their CWSC sports uniform ( <u>no skirts or dresses</u> ) and have with them a water bottle. We are seeking parent helpers to attend this event to assist students with their movements. If you are available and willing to help, please speak to your child's classroom teacher.					
<b>Classes/Year Groups:</b>	Year 1		<b>Number of Attending Adults:</b> 10+			
			<b>Fee Code</b>		GYMYR1	

**NOTE:** This excursion is an optional enrichment activity and parents are expected to cover the costs incurred. If however there is insufficient total funding available to meet the cost of the excursion, regrettably we may not be able to proceed.

**PLEASE COMPLETE AND RETURN TO THE FRONT OFFICE NO LATER THAN THURSDAY 29<sup>TH</sup> AUGUST:**

I consent to my child \_\_\_\_\_ in roll group \_\_\_\_\_ in attending the excursion to the **Woden Valley Gymnastics Club**.

I have paid the full amount of \$10.00 (Fee Code GYMYR1)

**PAYMENT METHOD** (tick one): (Please see over for details on how payment can be made)

<input type="checkbox"/> <b>Cash/Cheque</b>	<input type="checkbox"/> <b>EFTPOS</b>	<input type="checkbox"/> <b>Direct Deposit</b>	<input type="checkbox"/> <b>Quickweb</b>
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We have an **Excursion Medical Information and Consent Form** on file. Please note any information about current medical requirements and/or other needs of the child relevant to this excursion. **IF MEDICAL INFORMATION HAS CHANGED PLEASE PROVIDE AN UPDATED Excursion Medical Information and Consent Form TO THE SCHOOL (available for download from the school website or from the Front Office)**

I have read all the information at the top and on the back of this permission form regarding this excursion and understand and consent what it contains:

**Signature of Parent:** \_\_\_\_\_





Pay in person with cash or cheque:

Correct amount would be appreciated as we do not carry change.

Cheques are made payable to *Charles Weston School*.

Pay by Direct Credit:

Bank transfer into the school bank account.

BSB: 032 -777

Account: 002650

Account Name: Charles Weston School Coombs

Reference: Student Name & GYMYR1

Pay by Debit/Credit card:

Payments made via Debit/Credit Card can be made in via EFTPOS either in person to the Front Office, over the phone, or by completing the page attached  
OR

Using Westpac Quickweb payment service.

Click on the *PAYMENT* tab on the school website:

[www.charlesweston@act.edu.au](http://www.charlesweston@act.edu.au)

Fee Code

GYMYR1

*Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities. A risk assessment for this activity has been completed and is available to view upon request.*

*Parents should be aware that staff members are not responsible for injuries or damage to property which 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.*

*The school has made every effort to keep costs for this activity at a reasonable level. Financial assistance may be available to assist families who are not able to make the requested contribution. Please contact the Business Manager. If however there is insufficient total funding available to meet the cost of the excursion, regrettably we may not be able to proceed. If your child is not able to attend on the day, refunds may not be available for some or all of the costs.*

*The teacher in charge will make arrangements for the welfare of the student (including medical or surgical treatment) in an emergency. The costs associated with any emergency arrangement made by the teacher in charge will be met by the parents/guardians (free ambulance transportation only applies in the ACT).*

*The student will be under the authority of the school for the duration of the excursion and that the teacher in charge is authorised to return the student to the school at the expense of the parent/guardian if the teacher in charge considers that circumstances warrant such action and after contacting the parent.*



## EFTPOS PAYMENT

Payment For: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Roll Group: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Type of Account (Please Circle): Mastercard or Visa

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_ / \_\_\_\_

Amount: \$

Signature of Cardholder: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_