



Murwillumbah Public School
PO Box 3, Prince Street
MURWILLUMBAH NSW 2484

Ph: 02 6672 1467
Fax: 02 6672 1008

ABN: 12 910 243 341

email: murwillumb-p.school@det.nsw.edu.au

1st December 2022

Stage 2 End of Year Excursion

Dear Parents/Carers,

All students in Year 3 and 4 are invited to attend our end of year excursion to Currumbin Wildlife Sanctuary on Tuesday 13th December 2022.

The school is heavily subsidising the cost of this excursion. The cost is only \$2.00 per student. We will catch the bus to Currumbin at 9am and will return before 3pm.

We will participate in an educational session and look at a variety of native animals. We will then cool down by splashing in the new water splash zone! There is no swimming. Water facilities are sprinklers.

Please bring recess, lunch, drink bottles and a school hat.

Students need to wear swimmers under their full school uniform. This includes a rash shirt. Please put underwear and a towel in a plastic bag to change into after wet activities. Please apply sunscreen.

The children will be supervised by Mrs Watkins, Mrs Barbagallo, Mr Halloran, Mr Gamble, Mrs Jarvis, Mrs Wilkes and Mr Pasterfield.

Louise Watkins
Assistant Principal

Les Daley
Principal

Please return signed permission note and money by Friday 9th December 2022.

Stage 2 End of Year Excursion

I give permission for my son/daughter _____ of class _____ to attend the Stage 2 excursion on Tuesday 13th December 2022. I understand travel to Currumbin Wildlife Park will be by bus.

The special needs of my child of which you need to be aware e.g. allergies, medication, diet etc.

NSW Department of Education Consent Statement: I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures. I acknowledge and accept that there is a risk that my child may be exposed to COVID-19 whilst attending and participating at this event. I confirm that my child will not attend if displaying any symptoms of illness, and/or if directed to isolate under public health orders.

Signed _____
Parent / Guardian / caregiver

Date _____