

# Our Lady of Mt Carmel Primary



## YEAR 1 EXCURSION NOTE- WENTWORTHVILLE WOOLWORTHS

**Name of Excursion:** Wentworthville Woolworths

**Purpose of Excursion:** *Where our food comes from - from the farm to the store, to our table.  
Looking at healthy food choices.  
What are some better choices for our snacks?*

**Date of Excursion:** 4 September 2018

**Excursion Location:** Wentworthville Woolworths 326-336 Great Western Hwy, Wentworthville NSW 2145

**Mode of Transport:** Walking

**Time of Departure:** 9:15am

**Expected Return Time:** 11:00am

**Items Required:** Please wear full sport uniform

***The cost of this experience is covered by the Activities Fee included in your annual School Fee Statement.***

**Please return the signed section below to the class teacher by Friday 31 August 2018.**

✂ -----  
**EXCURSION NOTE-WENTWORTHVILLE WOOLWORTHS**

I give permission for my child \_\_\_\_\_ in Class \_\_\_\_\_ to attend the excursion to Wentworthville Woolworths. I understand children will walk to Woolworths. \_\_\_\_\_

Is your child allergic to any drug? \_\_\_\_\_  
(If so, please name drug)

Is your child at present on any medication? \_\_\_\_\_  
(If so, please name medication)

\_\_\_\_\_  
Parent/Carer Name

\_\_\_\_\_  
Parent/Carer (Signature)

\_\_\_\_\_  
Date

This excursion requires parents to assist with supervision. If you are able to attend the excursion, please complete the form below and return to school as soon as possible. It is not always possible to take all available parent volunteers. You will be notified if your attendance is required on this occasion.

- I have attended a Child Protection Briefing for Volunteers at school within the past 2 years.
- I have completed the 'Building Child Safe Communities - Undertaking for Volunteers' Form within the past 2 years.
- I have completed the online Child Protection Training Module within the past 2 years.

Name \_\_\_\_\_ Signed \_\_\_\_\_

**IMPORTANT: THIS SECTION MUST BE RETURNED BEFORE THE EXCURSION DATE.**

