



Year 6 Circus Workop at UC High School Kaleen

Tuesday 3 March 2020

Dear parents and carers,

Year 6 students have been invited to attend a Circus Workshop at UC High School Kaleen.

Year 9 and 10 students from the high school will work with Pip Scott (Circus teacher and trainer) and other Warehouse Circus trainers to plan and deliver the workshop.

Students will work in groups to complete a circuit which may include mini tramp, adagio, lyra/hammock, diabolo, static trapeze, tumbling shapes, rola bola, and club rolling. All circus activities at UCHSK are run under the risk assessment recommendations from Warehouse Circus.

- Where:** UC High School Kaleen
Date: Monday 30 March 2020
Time: Departing school at 9.10 am and returning to school by 11:00 am
Cost to Pay: Nil
Bring: Fruit, lunch, water, hat & sensible walking shoes
Note due: Please return the permission slip by Monday 23 March 2020

A risk assessment has been completed for this excursion and is available at the front office for viewing if requested.

Thank you

Nicole Smith, Katie Duncan and Sarah Dorrrough



Year 6 Circus Workshop at UC High School Kaleen

Have there been any changes in your child's medical status since you last provided the school medical information?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please complete a new EXCURSION MEDICAL INFORMATION AND CONSENT FORM	
Is there any additional information you need to provide to support your child's participation in this excursion?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide these details to your child's teacher.	
Will your child require medication to be administered during the excursion (e.g. allergy medication, pain relief)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If YES, please state name of medication, dosage, etc. (Please note: The teacher in charge must be informed about the management of any medication prior to leaving on an excursion. Arrangements need to be agreed on the transport, storage and administration of medication. In all cases medication must be labelled with the student's name, dosage and frequency of administration):	

Code of Conduct and Parental Agreements:

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. Unacceptable behaviour will be treated as it is normally treated at school, (reminders, time out in a designated spot, and exclusion from an activity) but with the additional factor that the student may be returned to school should the behaviour be extreme or overly persistent. 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.

I agree to my child participating in the activities mentioned previously. I have discussed with my child the need for sensible behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child's attending this event.

I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency. I agree to provide any relevant medical information to the school to the excursion.

I have read the **Code of Conduct and Parental Agreements** I give permission for my child _____ in year 6 to attend the Circus Workshop excursion to UC High School Kaleen on 30/03/2020 - travelling on foot.

Parent/Carer Name: _____

Parent/Carer Signature: _____

Date: _____ Class: _____

This form requests information about students which will be held by the school. This information may be disclosed to government or private medical or para-medical staff and other relevant officers in the event of an accident or emergency. The information is collected as a lawful administrative function of the ACT Education Directorate.