



## Westbourne Park Primary School

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Dear Parents/Caregivers,

On Wednesday of Week 2 (20<sup>th</sup> of October), M7 will be going on an excursion to the Adelaide Planetarium at UniSA Mawson Lakes.

The Planetarium's night sky experience takes visitors on a journey through the galaxy using a star projector. Illuminating the eight-metre diameter domed ceiling with an artificial night sky, the projector shows the relative positions and brightness of about 5,000 stars visible from the Southern Hemisphere, constellations, and planets. This ties in with our Science learning about the Solar System.

We will be travelling by bus; leaving school at 9am and returning by 12:30pm.

Children need to bring a packed recess, a drink bottle and a hat.

The full cost of the excursion is \$23.00. \$17 will be covered by funds in the excursion levy. An invoice for the remaining \$6 is attached. Please make payment of the \$6 and return the attached consent form by Thursday October 14<sup>th</sup>.

Kind Regards,

Megan Gregor



Government of South Australia  
Department for Education



**CONSENT FORM FOR CAMP, EXCURSION, SPORTING OR ADVENTURE ACTIVITY**

**(Note: that parents/legal guardians includes independent students, see definitions of the camps and excursions procedure)**

Requirements in this document must not be altered. Please use block letters when filling out this form

**As a parent/legal guardian of:**

STUDENT/CHILD'S NAME

I:  
PARENT/GUARDIAN NAME

**give my consent for [name of child] to participate in:**

NAME OF CAMP/EXCURSION/SPORTING OR ADVENTURE ACTIVITY  
Adelaide Planetarium

at/on:  
LOCATION  
UniSA Mawson Lakes Campus

FROM: [ ] [ ] [ ] TO: [ ] [ ] [ ] OR ON: 2 0 1 0 2 1

Does your child have any health support, or medication administration needs that should be considered for camps, excursions etc? Yes  No  N/A

If Yes, has a care plan/medication agreement been provided to the school/preschool? Yes  No  N/A

*If No, please provide a completed care plan/medication agreement to the school/preschool on completion of this form.*

Any other matters that may impact your child's participation in the above activities safely? Yes  No

*If Yes, please outline details to the school/preschool in the box below.*

[Empty box for additional details]

Details of **planned activities, transport arrangements, anticipated number of students/children and supervising teachers/instructors** are provided on the information sheet below.

**Agreement**

- I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
- In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child. I understand that I may seek payment of any ambulance invoice by the department if my child does not have private ambulance cover.
- Where appropriate I have also attached additional or updated health care information, including details of any additional health support he/she requires to undertake the above activities safely.
- The information given is accurate to the best of my knowledge.
- I acknowledge that a risk management form is available upon request for my inspection at the site.

Signed: \_\_\_\_\_

Date: / /

**Parent/Legal Guardian (in case of emergency)**

NAME

RELATIONSHIP TO CHILD

ELEPHONE (1) TELEPHONE (2) MOBILE

Student Medic Alert Number (If applicable):

Any health care information provided is not intended to prevent your child participating unless specific medical advice warrants exclusion. The health care information you supply to the school/preschool will be treated confidentially. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any health care problems.



## ACTIVITY INFORMATION SHEET

<p>REASON FOR AND DESCRIPTION OF PLANNED ACTIVITIES</p>	<ul style="list-style-type: none"> <li>- Australian Curriculum Year 5- Earth and Space Sciences: The Earth is part of a system of planets orbiting around a star (the sun) (ACSSU078)</li> <li>- Planetarium's night sky experience takes visitors on a journey through the galaxy using a star projector. Illuminating the eight-metre diameter domed ceiling with an artificial night sky, the projector shows the relative positions and brightness of about 5,000 stars visible from the Southern Hemisphere, constellations, and planets.</li> <li>- Solar System topics covered in the session             <ul style="list-style-type: none"> <li>→ The order and distances of planets</li> <li>→ Difference between rocky planets and gas giants</li> <li>→ Why are gas giants so big and rocky planets small?</li> <li>→ Where do asteroids and comets come from</li> <li>→ How was the moon formed?</li> <li>→ About planetary exploration with space craft</li> </ul> </li> </ul>
<p>TRANSPORT ARRANGEMENTS</p>	<p>Adelaide Coachlines- 33 Seater Bus</p>
<p>NUMBER OF STUDENT/CHILDREN ATTENDING</p>	<p>29</p>
<p>NUMBER OF SUPERVISING TEACHERS, INSTRUCTORS AND ADULTS ATTENDING</p>	<p>1 teacher per class, 2 parent volunteers</p>
<p>FOR EDUCATION AND CARE SERVICES – THE EDUCATOR TO CHILD RATIO</p>	<p>1:10</p>