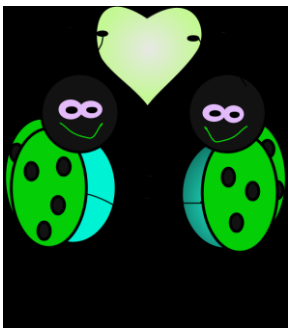
Melbourne Museum Excursion
Thursday 4th May 2017



Dear Parents and Carers,

As part of the Inquiry Program for term 2, PK,1H, 2L and 2S will visit the Melbourne Museum. There we will visit the Bugs, Bugs, Bugs exhibition and have a special lesson led by museum staff. We will also visit the First Peoples exhibition, Forest Gallery and the Dinosaur Walk exhibition.

- The children will be required to wear school uniform on the day. They will need their own snack, drink and lunch separately packed in disposable containers so there would be no need to worry about looking after lunch boxes.
- We will look after the lunches and snacks in separate baskets so please pack them separately and write your child's name on each packet.
- The cost for this excursion will be **$23.00**. This will cover the cost of a coach with seatbelts and entry into the exhibitions and the museum staff led "Bugs, Bugs, Bugs" lesson.

Could you please sign the permission form below and send the money to the class teacher by Monday 1st May, to assist final planning.

The bus will allow space for 3-4 parents per class to assist with supervision of the children (depending on the numbers in your child's class). If you would like to come with us in the bus and help on the day, please let your child's teacher know. If we have more parents than needed then we will have to "ballot" the helpers.

Kind Regards: Jenny Small , Lee Jellis, Catherine Higgins, Amanda Kershaw

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Permission & Payment Slip – Melbourne Museum Excursion (PK,1H,2L,2S)

I give permission for my child……, in Grade/Class……..to attend the above mentioned excursion.

I, …… permit the teacher in charge to arrange for any medical treatment for my child as is deemed necessary at the time.

…… …… ……
Parent Signature Date Contact No. on day of excursion

Please find enclosed full payment: Cash or Cheque *(please circle)* OR

CREDIT CARD PAYMENT AUTHORITY – please complete all sections

Child's Name_____ Class_____

***Master Card / Visa Expiry Date:* ____/____ *Amount* $23.00**

Cardholders Name: _____ Signature*:* _____

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