



Wednesday, October 28, 2020.

Merimbula Public School - Year 5 Jindabyne Excursion Monday, December 14 to Tuesday, December 15 2020

Dear Parent/Grandparent/Caregiver,

The Year 5 Jindabyne Excursion has been confirmed. This trip compliments the Personal Development and Health and Mathematical outcomes we have covered throughout the year. The **cost of this excursion is \$240**. The 1-night, 2-day excursion will offer students the opportunity to get a hands-on experience of the issues and subject matter they have explored throughout the year.

Families are welcome to pay in full or to pay in instalments. The first instalment (deposit) of \$100 is due on Friday, November 13 (Week 5). Full payment will also be taken by November 13. If paying in two instalments, the second and final instalment of \$140 is due by Friday, December 4 (Week 8).

This money covers accommodation, all entry fees, activities, bus transport and MOST food (not morning tea on the way). Students will lodge at the Jindabyne Sport and Recreation Centre for their stay. A detailed itinerary will be distributed to all students closer to the event. If you have any further questions please contact your child's teacher via Class Dojo Messenger.

Payment for this excursion will be non-refundable. If a child is pulled out by their parent (i.e. for illness, moving, non-payments, flu-like symptoms) or the school (i.e. for non-payment, student behaviour code not being complied with, COVID closures or restrictions), all monies will be forfeited.

Children presenting with flu-like symptoms will not be able to attend the excursion. Should a child present with flu-like symptoms during the excursion, they will be isolated until collected by their parent/caregiver.

Thank you for your assistance and support,
Ms Michelle Hulme
Principal



2020 Jindabyne Year 5 Excursion

Please return this note and first instalment of \$100 (deposit), or total payment, to the office by Friday, November 13 (Week 5)

Dear Ms Hulme,

I give permission for my child _____ of class _____ to attend the Jindabyne Excursion. I understand payment for this event is \$240.00. I understand that should my child not attend the excursion, for whatever reason, their total payment will be forfeited.

Payment can be made and permission given in a number of different ways. I have paid in the following way:

- ☐ Payment via school website (click on Make a Payment at the top) fill in all green asterisks and 'tick' *Excursions* under Payment Option. Use the payment description 'Stage 3 (Year 5) Jindabyne Excursion'. I have paid \$100 / \$240. My receipt number is _____.
- ☐ Cash payment in envelope to office with permission note. I have paid \$100 / \$240.
- ☐ EFTPOS payment over the phone to our office on 6595 1266 (with the permission note returned to school). I have paid \$100 / \$240.
- ☐ I have not made a payment as my child will not be attending the camp.

Parent/Caregiver Name: _____

Signed: _____ Date: _____



Wednesday, October 28, 2020

Year 5 Camp – Food Requirements

Dear Parents and Caregivers,

The Year 5 Jindabyne camp is approaching and there is still some housekeeping that needs to be organised.

FOOD ALLERGIES & REQUIREMENTS

Please advise us if your child/ren have any specific food allergies or requirements, such as: Do they require Halal meals? Are they allergic to certain food? Do they require an EpiPen for certain food?

MEALS

Students are required **to provide their own packed recess and water for the bus trip to Jindabyne.** Please do not pack this in their larger bags as they will not be able to get these from under the bus during the trip. All other meals will be provided. Details regarding meals will be provided at a later date.

Please return the below form to the office by Friday, November 6. If there are no food allergies or requirements, please write NIL on the slip and have it returned. If you have any questions or requests, please contact your child's class teacher.

Thank you for your assistance.

Ms Michelle Hulme
Principal

Please return this note to the office by Friday, November 6, 2020

Dear Ms Hulme,

My child _____ of class _____ has the following food allergy and/or requirement/s: _____

Parent/Caregiver (please print): _____

Signed: _____ **Date:** _____ **Contact PH:** _____