



Redhead Public School

Principal: Mrs Lisa Monaghan

Dear Parent/Caregiver:

An excursion/event has been organised for your child. Information is as follows:

Please retain this page for your reference.

Excursion:	Charlestown Cup - This will involve all Stage 2 children from the Whitebridge Community of Schools playing 6 different sports (T-Ball, Oz Tag, European Handball, Soccer, Golf, Continuous Cricket)
Venue:	St John Oval, Charlestown
Date(s):	Thursday, 27 September
Classes/Group Involved:	Years 3 and 4
Cost of excursion/performance is:	\$10
Payment due by:	Wednesday, 19 September
Depart school (time):	9:30am
Return by (time):	3:00pm
Travel will be by:	Seat belted bus
What to wear:	Sports uniform
The groups will be supervised by:	Stage 2 teachers, Mrs Lapornik, Ms Vaughan and Mrs Griffiths
Additional information:	<p>A pre-ordered lunch deal is available for \$5. If you would like to order this deal for your child please complete the attached order form and return it to school with \$5 (cash only) by Wednesday 19 September.</p> <p>Students will be allowed to go to the canteen at recess but please provide their fruit break. Children may also bring a packed lunch. Remember to bring plenty of water to drink during the day.</p> <p>NB: Sunscreen for all excursions is to be provided by parents/carers. School hats are to be worn.</p>

Mrs Lisa Monaghan
Principal

Mrs Amy Kurtz
Stage 2 Assistant Principal



Redhead Public School

Principal: Mrs Lisa Monaghan

Charlestown Cup Years 3 & 4

I consent to _____ in _____ (class) participating in the above excursion on 27 September. I understand travel is by seat belted bus and the cost is \$10. I am aware of the nature of activities that my child will be participating in.

I have enclosed \$10 as payment or

I have made my payment online. My receipt number is _____

Online Payments can be made by clicking on the Make a Payment link (\$) on the schools website and following the instructions.

Please circle:

In the event of any accident or illness, I **give / do not give** permission on my behalf of such medical assistance as my child may require. I also agree to pay for medical treatment which may be incurred while my child is on the excursion.

The information provided is being obtained for the purposes of ascertaining relevant medical information, requirements and other health care related needs about your child who is currently enrolled at the school and is participating in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Redhead Public School.

It will be used by officers of the NSW Department of Education to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternate educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about the provision of this information, please contact the school Principal to discuss further.

Student Name: _____ Medicare number: _____

Parent/carer name: _____ Phone: _____

Parent/carer name: _____ Phone: _____

Emergency contact details: (nominated by parent or caregiver as alternate contact).

Name: _____ Phone: _____

List existing medical conditions or illnesses (include asthma, diabetes, epilepsy, allergies etc). Outline treatment for each.

Medication to be administered during the excursion. Include name of medication, instructions for administration, time of administration, and any possible reactions.

Please return permission note and money by 19/9/18. Late permission notes will not be accepted and children will miss out.

Parent/carer signature: _____

Date: _____

Email: redhead-p.school@det.nsw.edu.au

Tel: (02) 4944 7215
Fax: (02) 4942 6098

Website: www.redhead-p.schools.nsw.edu.au

Charlestown Cup 2018 Lunch Order

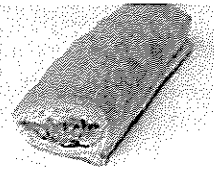
Charlestown Cup will be held on Thurs 27th September 2018 at St John Oval Charlestown. Due to the huge demand placed on the canteen during Charlestown Cup, we strongly encourage you to pre-order one of the attached **\$5 Meal Deals** which are available on the day.

It's simple! Choose a Meal Deal, circle your Drink & Sauce choice, and write in your school, name & year (3 or 4). Cut your order out & place it in a sealed envelope with your \$5. Then drop this envelope in to your school's front desk. **Correct money must be enclosed in envelope – change is not available.**

Canteen will be open throughout the day for yummy **drinks, treats & snacks**, so make sure you bring some spending money! Limited hot food will be available over the counter, so we urge you to pre-order to avoid disappointment.

Please complete and return this form (in a sealed envelope with correct money) to your school's front desk by 9.30am Wednesday 19th September (one week prior to Carnival). The forms will be collected that morning by Kahibah Public School canteen staff. Absolutely no orders can be accepted after this time/date.

ROLL WITH IT



Large Lean Beef Sausage Roll

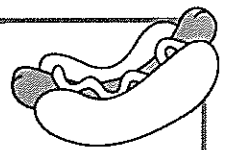
Tomato Sauce / BBQ Sauce (Circle one)

Drink Options:

Juice - Apple Orange Apple & Blackcurrant
Water (circle one)

School.....
Name.....
Year (3 or 4)

HOT DIGGETY DOG!



Hot Dog on bun

Tomato Sauce / BBQ Sauce (Circle one)

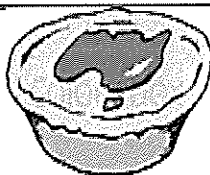
Drink Options:

Juice - Apple Orange Apple & Blackcurrant
Water (circle one)

School.....
Name.....
Year (3 or 4).....

\$5 EACH

LIFE OF PIE



Large Lean Beef Pie

Sauce - Tomato or BBQ (circle one)

Drink Options:

Juice - Apple Orange Apple & Blackcurrant
Water (circle one)

School.....
Name.....
Year (3 or 4).....

MR RICE GUY



California Sushi Roll x 2 (GF)
Soy Sauce

Drink Options:

Juice - Apple Orange Apple & Blackcurrant
Water (circle one)

School.....
Name.....
Year (3 or 4).....