

COLONEL LIGHT GARDENS PRIMARY SCHOOL VACATION CARE: EXCURSION FORM

I give..... permission to participate in these planned excursions (Please tick where applicable)

Excursion	Purpose	Date	Means of transport	Time frame	Destination	Items taken	Number of children	Number of staff	Ratio of children
St Kilda Tram Museum	To extend children's knowledge of transport and the history of trams.	Wednesday 11 th April	Private bus	Two hours	St Kilda	.mobile phone .attendance records .emergency contacts .first aid kits	39	5	1:8
South Australian Museum	For children to explore and engage in the facts that the Museum has to offer.	Thursday 12 th April	Private bus	Two hours	City of Adelaide	.mobile phone .attendance records .emergency contacts .first aid kits	39	5	1:8
Mitcham Movies	To give children the opportunity to be engaged and involved in community activities.	Tuesday 17 th April	Private bus	Two hours	Mitcham Shopping Centre	.mobile phone . attendance records .emergency contacts .first aid kits	39	5	1:8
Challenge Hill	For children to use their gross motor skills in using various equipment.	Wednesday 18 th April	Private bus	Two hours	Woodside	.mobile phone . attendance records .emergency contacts .first aid kits	39	5	1:8

Medication Required: YES/NO

If yes, details.....

Emergency phone number:

Signature:.....