





KALEEN	Excui 510	IIFE	ermission in	ole	Educ	
Where:	Questacon					
Purpose:	Students will visit the Above and Beyond exhibition at		Transport:	\$5		
(including cost breakdown)	Questacon. Presented by Boeing in collaboration with NASA, Above and Beyond celebrates the power of innovation and features: immersive simulations; augmented reality; interactive design challenges; iconic historical touchstones; visionary concepts for the future;			Meals/ Accom:	\$	
				Staffing:	\$	
	and inspiring stories from game-changing innovators, past and present.		Program:	\$15		
Date:	28 June, 2017	Time:	9.15am-2:45pm	Total Cost:	\$20	
Transport:	Keir's Coaches					
Staff Attending:	Jennifer Comans, Colin Montgomery, Brandon Steele and Gary Rolfe					
Special Requirements/ Medical Changes:	Students may bring their own recess and lunch or they may bring money. However, the cos of food at the cafe at the Questacon is significantly higher than at the school canteen.					
Meeting time and place:	Students should meet in the canteen area after Pastoral Care.					
	non-refundable advance bookints change their minds about at cursion.					
injury and to control and s Should there be any chaplease notify the teacher	ents on excursions will take all supervise their behaviour and a anges to your child's medical r supervising this excursion that staff members are not res	activities. I l circumst I.	ances (as outlined in their e	nrolment medical	information)	

Parents should be aware that staff members are not responsible for injuries or damage to property that may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

Please note: If you are experiencing financial hardship regarding this excursion, please contact the Principal to discuss payment options. The Education Act 2004 states that your child will not be refused benefits or services if you do not choose to contribute. Individual records of contributions are confidential.

Please do not hesitate to contact me at the school if you have any questions or require any further information.

Jennifer Comans Co-ordinating teacher	Lana Read Principal
I wish for my child	to attend the excursion to Questacon on 28 th June.
<u>I understand the conditions set out above and have</u>	ve read the attached schedule of events. anged OR New medical information is attached
Signed	Date Parent Name (printed)
CREDIT CARD AUTHORITY	☐ Cash ☐ Direct Deposit ☐ QuickWeb ☐ Cheque BSB: 032777 A/C: 001455
I hereby give authority for payment to be made fro	om my credit card. My credit card details are:
Card No: Cardholder's Name:	• Date:
Cardholder's Signature:	Amount: \$