



**CAPTAIN COOK'S COTTAGE AND FITZROY GARDENS EXCURSION - HG 9 and 10**

Dear Parents/Carers,

28/4/2016

This term the students in year 3/4 are studying a history unit entitled "The first fleet". This involves looking at Australia's indigenous inhabitants as well as the exploration and subsequent settlement by the Europeans. As Captain Cook's explorations played a major role in these developments we have planned an excursion to visit 'Captain Cook's cottage'. Students will participate in lessons to enhance their learning at school. Students will also have the opportunity to explore the 'Fitzroy Gardens' which have some interesting features including the 'Scarred Tree' - bark from this tree was used by the Aborigines to make canoes.

|                |  |
|----------------|--|
| Who:           | Students in HG 9 and HG 10 (other classes to attend on a different day)  |
| When:          | <b>Monday May 23rd</b>   |
| Where:         | Captain Cook's Cottage and Fitzroy Gardens   |
| Cost:          | <b>\$16</b>  |
| Payment:       | Cash, cheque, EFTPOS or BPAY   |
| Travel:        | Bus  |
| Bring:         | All food and drink in disposable containers in <b>one</b> named bag.   |
| Sign & Return: | <b>Both</b> Permission slips and money are DUE BACK to school by <b>Thursday May 19th</b>                                |
| Assistance:    | Indicate on form below if you are available to assist on this excursion.<br><u>Working with Children Check required.</u> |

**The 3 /4 team**

**OFFICE COPY EXCURSION TO CAPTAIN COOK'S COTTAGE AND FITZROY GARDENS 2016 HG 9and HG 10**

I consent to my child \_\_\_\_\_ in Home Group\_\_\_\_\_ participating in the excursion to **Captain Cook's Cottage** and the **Fitzroy Gardens**. I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to the child's receiving such medical or surgical treatment as may be deemed necessary should the situation arise. I have enclosed \$16 in **cash** or paid by **BPAY** or **EFTPOS** (please circle).

My child suffers from asthma: Yes / No (If YES, your child must take their own puffer on excursion)  
My child suffers from travel sickness: Yes/No

Emergency Contact Phone Numbers on this day: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**EXCURSION COPY EXCURSION TO CAPTAIN COOK'S COTTAGE AND FITZROY GARDENS 2016 HG 9 and HG 10**

I consent to my child \_\_\_\_\_ in Home Group\_\_\_\_\_ participating in the excursion to **Captain Cook's Cottage** and the **Fitzroy Gardens**. I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to the child's receiving such medical or surgical treatment as may be deemed necessary should the situation arise. I have enclosed \$16 in **cash** or paid by **BPAY** or **EFTPOS** (please circle).

My child suffers from asthma: Yes / No (If YES, your child must take their own puffer on excursion)  
My child suffers from travel sickness: Yes/No

Emergency Contact Phone Numbers on this day: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I can assist on this excursion and I have a current **Working With Children Check**

Name: ..... Phone: ..... Child's Name: .....HG .....



## CAPTAIN COOK'S COTTAGE AND FITZROY GARDENS EXCURSION - HG 7,8,26

Dear Parents/Carers,

28/4/2016

This term the students in year 3/4 are studying a history unit entitled "The first fleet". This involves looking at Australia's indigenous inhabitants as well as the exploration and subsequent settlement by the Europeans. As Captain Cook's explorations played a major role in these developments we have planned an excursion to visit 'Captain Cook's cottage'. Students will participate in lessons to enhance their learning at school. Students will also have the opportunity to explore the 'Fitzroy Gardens' which have some interesting features including the 'Scarred Tree' - bark from this tree was used by the Aborigines to make canoes.

|                |  |
|----------------|--|
| Who:           | Students in HG 7, HG 8 and HG 26 (other classes to attend on a different day)  |
| When:          | <b>Wednesday May 25th</b>  |
| Where:         | Captain Cook's Cottage and Fitzroy Gardens   |
| Cost:          | <b>\$16</b>  |
| Payment:       | Cash, cheque, EFTPOS or BPAY   |
| Travel:        | Bus  |
| Bring:         | All food and drink in disposable containers in <b>one</b> named bag.   |
| Sign & Return: | <b>Both</b> Permission slips and money are DUE BACK to school by <b>Thursday May 19th</b>                                |
| Assistance:    | Indicate on form below if you are available to assist on this excursion.<br><u>Working with Children Check required.</u> |

### The 3 /4 team

#### OFFICE COPY    EXCURSION TO CAPTAIN COOK'S COTTAGE AND FITZROY GARDENS 2016    HG 7, 8, 26

I consent to my child \_\_\_\_\_ in Home Group \_\_\_\_\_ participating in the excursion to **Captain Cook's Cottage** and the **Fitzroy Gardens**. I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to the child's receiving such medical or surgical treatment as may be deemed necessary should the situation arise. I have enclosed \$16 in **cash** or paid by **BPAY** or **EFTPOS** (please circle).

My child suffers from asthma: Yes / No (If YES, your child must take their own puffer on excursion)  
My child suffers from travel sickness: Yes/No

Emergency Contact Phone Numbers on this day: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### EXCURSION COPY    EXCURSION TO CAPTAIN COOK'S COTTAGE AND FITZROY GARDENS 2016    HG 7, 8, 26

I consent to my child \_\_\_\_\_ in Home Group \_\_\_\_\_ participating in the excursion to **Captain Cook's Cottage** and the **Fitzroy Gardens**. I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to the child's receiving such medical or surgical treatment as may be deemed necessary should the situation arise. I have enclosed \$16 in **cash** or paid by **BPAY** or **EFTPOS** (please circle).

My child suffers from asthma: Yes / No (If YES, your child must take their own puffer on excursion)  
My child suffers from travel sickness: Yes/No

Emergency Contact Phone Numbers on this day: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I can assist on this excursion and I have a current **Working With Children Check**

Name: ..... Phone: ..... Child's Name: .....HG .....