



LEURA PUBLIC SCHOOL
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respect

responsibility

resilience

Monday 23rd November 2020

Scenic World Katoomba –Stage 1 Excursion

Excursion Date: Thursday 10th December 2020

Note: Payments can be made online, by cash or cheque

For payments online enter: **Payment description:** Scenic World

Payment amount: \$25.00

Last date for payment: Friday 4th December 2020

Please note NO late payments will be accepted.

Dear Parents/Carers,

On **Thursday 10th December 2020**, we have planned an excursion for Stage 1 to go to Scenic World Katoomba. This excursion will support our learning in Science.

We will be travelling by bus and students need to be at school by **9.15am**. The bus will be leaving at **10.30am**. We will be returning to school for Recess.

Please note: Both Scenic World and the bus company have strict COVID-19 guidelines that they need to adhere to in order to keep everyone safe.

The children will need to wear full school uniform including their school hat. Please send food for their recess and lunch in a backpack and include a couple of drinks. Do not send any glass bottles. Remember to have everything labelled with your child's name.

The cost for this excursion is being subsidised by the school. The total cost to families, which includes entrance fee and bus travel, is **\$25.00**. Please complete the permission slip below and return with payment by **Friday 4th December 2020**.

If you have any concerns with meeting this deadline or payment please contact the school office.

Yours faithfully,

Bronwyn Standen
Classroom Teacher

May Ptolemy
Principal

SCENIC WORLD KATOOMBA PERMISSION SLIP

I give permission for my child _____ of class _____ to attend the Scenic World Katoomba excursion to be held on Thursday 10th December 2020.

I understand travel will be by bus.

- I have enclosed **\$25.00** to cover costs for my child for the day **OR**
- I have paid online and my receipt# is _____
- The medical information held at school is current **OR**
- I have attached updated medical information

My contact number for the day will be: _____

Parent/Carer Name: _____ Date: _____

Parent/Carer Signature: _____