



## **EXCURSIONS**

*Revised January 2016*

### **Introduction**

It is believed at Somers Primary School that excursions out of the School's immediate environment are an important part of a student's education. Students' learning will be enhanced if the School provides an excursion program that is integrated into the curriculum.

### **Aims**

- To broaden students' learning experiences in different environments.
- To allow students to learn from real life situations, hands-on experiences, and meet experts in their fields.
- To provide opportunities for students to visit different areas of our State.

### **Implementation**

A plan for excursions will be drawn up early in each year and distributed to parents.

DEECD Guidelines will be followed when arranging an excursion using the School Reference Guide, Camps and Adventure Activities Booklet issued by the Education Department. On days of high fire danger, the Principal will have the capacity to cancel the excursion.

Approval for an excursion will be sought from the Principal via the planning form "Notice of Excursion". **This must be given to the Principal 3 weeks prior to the excursion.** School Council approval of all excursions will be sought - where this is not possible, the Principal will have the discretion to approve such excursions.

When the excursions involve adventure activities, camps, overnight stays and where there is an element of risk, School Council will be provided with full details for approval.

The staff will coordinate excursions using the attached planner.

Every excursion will have parent information letters, medical and consent forms sent home for parents to sign to give consent for their child to attend and must be **returned to the School prior to participating in the excursion. No phone permission will be accepted.** See the attached excursion form to be used by all staff with a letter explaining all the risks. A proforma is provided.

There will be a staff member responsible for coordinating each excursion and ensuring that the first aid bag and School's mobile phone are taken.

Local excursions are excursions to places within walking distance of the School such as Coolart, Somers Beach, Somers Camp, the Reserve and the Koala Reserve.

Generally, a *maximum of* three excursions outside the local community will be offered each year to all students.

Parents/guardians are to be given a minimum of two weeks notification of an excursion outside the local area.

Sport forms will be sent out at the start of the term with the standardised medical form to be used. Parents would then be able to fill this in once, so when an activity comes up the parent would only need to provide permission for their child to attend. It would be the parent's responsibility to update the medical information if their child's situation changes for any reason, including parent contact details, emergency contact details, or recent medical condition.

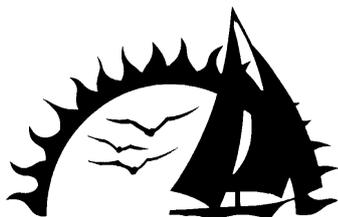
Assistance from parents/guardians may be sought so that the correct ratio is maintained.

When payment is required for an excursion, this is to be made prior to the excursion taking place. The Principal must be contacted if other arrangements are to be made.

**Preference will be given to buses with seatbelts. Parents will be given notification of whether or not the buses to be used have seatbelts.**

## **RISK MANAGEMENT**

Have an emergency phone contact system for excursions.



*Learning and Caring for the Future*

Somers Primary School  
 Camp Hill Road  
 Somers VIC 3927  
 Ph: 03 5983 5546  
 Fax: 03 5983 5262  
 Web: [www.somersps.vic.edu.au](http://www.somersps.vic.edu.au)  
 Email: [ingham.david.r@edumail.vic.gov.au](mailto:ingham.david.r@edumail.vic.gov.au)

As a Parent/Guardian of .....,  
 I ....., give my consent for him/her to participate in  
 ..... and  
 agree to delegate my authority to the teachers and instructors involved. Such teachers and instructors may take whatever disciplinary action they deem necessary to ensure the safety, wellbeing and successful conduct of the students as a group or individually in the above-mentioned activity.

I also authorise the teachers and instructors to obtain medical assistance, which they deem necessary should an accident occur, and agree to pay all medical expenses incurred on behalf of the above student.

I have read the attached cover letter and I am aware of the program for which my consent is requested.

I submit the attached medical information about the above student and include details of limitations which he/she has for the activity concerned.

I further authorise qualified practitioners to administer anaesthetic if such an eventuality arises.

**Signed:** ..... (Parent/Guardian)

**Date:** .....

**PERSONAL DETAILS**

**Home address:** .....

**Person to be contacted in an emergency:** .....

**Emergency phone number:** .....

**Medicare number:** .....

**Health insurance number (if any):** .....

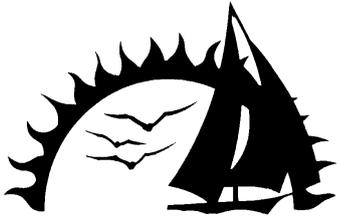
**Doctor:** ..... **Contact number:** .....

**Are you an ambulance subscriber?** Yes / No

**MEDICAL INFORMATION**

**Name of child:** .....

<i>Medical condition</i>		<i>Further information/instructions</i>
ALLERGY (Particularly bee-sting allergy or Anaphylaxis)	Yes / No	
BREATHING DISORDER (Particularly asthma)	Yes / No	
EAR DISORDER (Particularly drainage tubes or deafness)	Yes / No	
EPILEPSY (Whether mild or severe)	Yes / No	
FAINTING/DIZZY SPELLS (Or other sudden loss of consciousness)	Yes / No	
OTHER RELEVANT INFORMATION	Yes / No	



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Email: [ingham.david.r@edumail.vic.gov.au](mailto:ingham.david.r@edumail.vic.gov.au)

Date: .....

### NOTICE OF EXCURSION

To be handed to the Principal as early as is practically possible. Major excursions should have School Council approval.

**Title and date of excursion:** .....

.....

**Teacher in charge:** .....

**Destination:** .....

**Reason for excursion:** .....

.....

**Transport arrangements:** .....

.....

**Classes involved:** ..... **Total attending:** .....

**Other staff involved:** .....

**Parents involved:** .....

**Departure time:** .....

**Return time:** .....

**Is After School Care affected?** Yes / No

**Arrangements for leftover children:** .....

.....

**Cost per child: \$** .....

*(a detailed costing should appear at the bottom of this sheet. Include any parent costs and allow for any children who may not attend)*

**ORDER BOOK – FORMS**

**For each component of the cost of the excursion, have order forms been completed?**

Yes / No

If not, please complete the necessary order forms? Remember a form needs to be filled out for each cost - transport, entry fees, etc.

**Yard duty changes:** .....  
.....  
.....

**Are specialists affected?** Yes / No

**If yes, what arrangements have been made?** .....  
.....  
.....

**PRINCIPAL’S ENDORSEMENT**

**Signed:** ..... **Date:** .....

Please note: Children who have not paid by the day before excursion will not be permitted to attend unless arrangements have been made with the Principal.

**COSTING SCHEDULE**