Dear parents, this note is to inform you of a school activity which requires your permission and which details information for you regarding the activity planned for your child.

Dear Parent or Caregiver,

K-2 students will be participating in a Bus Safety program on Monday 20th and Tuesday 21st June, 2011. The program involves a demonstration and discussion about entering and exiting the bus safely and traveling on the bus. Students will also be taken on a short bus trip. The session will end with a brief DVD about bus travel, reinforcing what has been discussed. There is no cost for this excursion.

Following are the session details-

**Monday 20th June**

10:15-11:00am KLE/KMM/KLF  
11:25-12:10pm KWH/KSW  
12:10-12:55pm 1KB/1DP

**Tuesday 21st June**

10:15-11:00am 1NL/1HL  
11:25-12:10pm 2MG/2HP  
12:10-12:55pm 2CS/2RD

All staff members have emergency care training.

All staff members have CPR training.

K-2 staff and School Learning Support Officers will accompany their own class.

Darren Beard  
Excursion coordinator

Cameron Osborne  
Principal

*Please sign and detach the permission note on the bottom and return to class teacher by Friday 17th June, 2011.*

I do / do not consent to _________________________________ of class ____________ participating in the K-2 Bus Safety program being held on Monday 20th and Tuesday 21st June, 2011.

My son / daughter has the following special needs (please provide full details and include any relevant medical or dietary details).

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

I give / do not give permission for my child to receive medical treatment in case of emergency.

I give / do not give permission for my child’s photo to be published in any form of media, e.g. school website, local Newspaper.

Signature: Parent / Caregiver  
Date