

Year 6 MOAD Excursion

DESCRIPTION:

As part of the Year 6 history investigation into Australian democracy and citizenship students will be visiting The Museum of Australian Democracy (MOAD) to take part in the People Power Making Change program. They will learn about active citizenship and how change is made in Australia's democracy and investigate parliamentary roles within an historic chamber and discover how young people can have their voices heard.

DATE:

Friday, 3 July 2026

DEPARTING AT:

11.15 am

RETURNING APPROX:

2.00 pm

VENUE:

MOAD – King George Terrace, Parkes, Canberra

TRAVEL ARRANGEMENTS:

Bus

COST PER STUDENT:

\$ 16.00

CLASSES INVOLVED:

Year 6 students

TEACHER IN CHARGE:

Luisa Dal Col

ITEMS TO BRING:

School uniform, enclosed shoes and a SunSmart hat to be worn.

Please pack fruit, lunch, snacks and a drink bottle in a labelled bag for the excursion.

No canteen lunch orders will be available on the day.

ADDITIONAL INFORMATION:

A Risk Management Plan is available for this excursion upon request.

If it is determined that the weather will impact the safety of those attending and/or staff supervision cannot be met, the excursion will be postponed or cancelled.

Ratio - 4 adults : 55 students

First Aid: Brooke Penna



PAYMENT OPTIONS:

Pay using your credit/debit card by -

1. PARENT PORTAL payment. OR
2. Alternatively, you may wish to pay in person by EFTPOS/Cash at the Front Office.

Please keep this information page, then complete the permission form, make payment and return the permission note to the front office by Friday, 19 June 2026. (no late notes taken as numbers of students attending must be submitted)

Year 6 – MOAD Excursion

PLEASE RETURN TO THE FRONT OFFICE BY FRIDAY, 19 JUNE 2026.

Enter:

Student Name:

Class:

I hereby consent to my child attending the **Year 6 MOAD Excursion (Old Parliament House, King George Terrace, Parkes)** on Friday, 3 July 2026.

Cost: \$ 16.00

Please check the appropriate boxes:

I have read and understand the attached information page for the event/excursion and I consent to the payment and travel arrangements. *PLEASE NOTE: If you fill in this form, your personal information and that of your child will be collected and handled by the ACT Education Directorate (ETD) (Monash School). This information is necessary for us to be able to manage student participation in excursions and support the welfare and safety of your child. If you do not consent to supply us with this information your child will be unable to participate in the excursion.*

I confirm payment of \$ 16.00 via **PARENT PORTAL OR EFTPOS / CASH** (front office). Please circle one payment method.

I understand that the cost of buses is non-refundable as prices are determined by the total number of children travelling. If my child is unable to attend the excursion, and I require a refund (less bus fare), I should make a request in writing, within a week after the excursion to the Business Manager.

The School should be notified by 9.00 am on the day of the excursion if a student is unable to attend.

I understand that the ACT Government (the Territory) does not meet all claims for injury, disease or illness to students resulting from school activities or school organised excursions. Claims are only met where there is a liability to do so. Liability is not automatic and depends on the circumstances in which the injury was sustained. I understand I should obtain my own advice about insurance protection which may assist in meeting expenses if my child is injured in circumstances where there is no liability on the part of the Territory. The ACT Ambulance Service provides free ambulance transport for students who are injured or suddenly become ill at school or during school-approved activities within the ACT. Excursions to states and territories outside the ACT are not covered by free ambulance transport.

In serious cases where medical attention is necessary, and a parent/carer is not available, I authorise the school to make arrangements for the welfare of my child (including transport and medical/surgical treatment).

I agree that my child/children will be under the authority of the school for the duration of the excursion and that the school is authorised to return the student home at the expense of the parent/carer if the school considers that circumstances of unacceptable behaviour warrant such action.

The **medical information and emergency contact numbers** for my child/children held at the school **are correct and up to date**. Please supply the front office with any updated medical information or contact numbers as soon as possible.

I need to **UPDATE** the contact information held at the school as follows:

Parent/Carer Contact Number Name: _____ Number: _____

Parent/Carer Contact Number Name: _____ Number: _____

Home Telephone Number _____

Please change my "Other Emergency Contact" to: *(please include full name and contact number)*

Full Name of Parent/Carer:

Date:

Signature: