

## Ambarvale High School

Thomas Rose Drive Rosemeadow NSW 2560 PO Box 90 Campbelltown NSW 2560

Phone: (02) 4627 1800 Fax: (02) 4628 5289 Email: ambarvale-h.school@det.nsw.edu.au

Principal: Ms L Barnott-Clement, M.A., M.Ed., B.A., Dip.Ed. Deputy Principal: Ms M McKenzie, B.A., Dip.Ed. Deputy Principal: Mr D Macpherson, Dip.Teach.

## Educational Excursion Information and Consent Sydney Jewish Museum

Dear Parent

As part of the Australian Curriculum, Year 9 are studying the topic of World War Two as part of their HSIE curriculum. To summate key aspects of the topic for Term 2, students are being offered the opportunity to attend the Sydney Jewish Museum. This excursion will immerse students in the history and personal stories that encompass this time period, notably the Holocaust. It is a vital component of Year 9 studies for History.

When: Wednesday, 19 June 2019

Where: Sydney Jewish Museum, Darlinghurst

Itinerary and transport: Students are to meet at Ambarvale High School for an 8:00am departure. Students will travel to Darlinghurst by bus and have lunch upon arrival. Students will attend a tour at the Jewish Museum from 10:00am – 1:00pm. Upon completion of tour, students will return to school via bus.

Cost: \$20.00. All money must be paid to the office by Friday, 7 June 2019. A \$5.00 deposit must be paid by Friday, 17 May 2019 in order to secure a spot. Payments may also be made online via the school website (www.ambarvale-h.school@det.nsw.edu.au). Payments will not be taken after this date.

What to bring: Morning Tea and Lunch – there will be no opportunities to purchase food.

Dress Code: Full school uniform must be worn.

Departure from: Ambarvale High School at 8:00am

Return to: Ambarvale High School at approximately 2:50pm. Students are to make their own way home when they arrive back at school and may need to make alternative arrangements if they catch a bus.

Supervising Teacher/s: Emergency Care First Aid Certificate

Teacher in Charge: Ms C Simpson

Other Staff Attending:

Emergency Contact Number: 4627 1800

Please complete and sign the permission note attached and provide relevant medical information.

Ms S Arts
Deputy Principal
30 April 2019

Ms C Simpson HSIE Teacher

Year 9 History Coordinator



## Excursion Consent Sydney Jewish Museum

I give permission for my child _		to attend the HSIE	
Excursion to Sydney Jewish Museum	on Wednesday, 19 June 2019.	I understand that students will	
depart from Ambarvale High School	at 8:00am, and will return to sc	hool at 2:50pm. Students are to	
make their own way home when the	ney arrive back at school and	may need to make alternative	
arrangements if they catch a bus; my	child must wear full school un	iform; the cost of the excursion	
is \$20.00 and needs to be paid by Fri	iday, 7 June 2019. A \$5.00 dep	osit must be paid by Friday, 17	
May 2019 in order to secure a spot.			
Parents are responsible for their child	d's transport and safety prior to	departure time at location and	
following return time at location.			
MEDICAL INFORMATION:			
Medical conditions			
Allergies			
Diet requirements	The Part of the Pa		
Medication			
Other			
Medicare Number (optional)			
Parent/Emergency Contacts:			
Name	Contact Number	Relationship to Student	
1.			
2.		- the to 400 to 100 to	
Parent Signature:	Da	Date:	