



# ALBANY PRIMARY SCHOOL

☎ 32 Suffolk St Albany, WA 6330 ☎ 08 9844 2860  
 ✉ albany.ps@education.wa.edu.au ✉ albanyprimary.wa.edu.au



Dear Parents and Carers

I am pleased to provide you with the following details regarding our excursion.

<b>Excursion to:</b>	Centennial Park Eastern Precinct	
<b>Class/Year groups attending:</b>	Selected students from Year 3 to 6.  <b>Please note your child has been selected as a RESERVE for this event. Please complete and return the permission slip and send them to school ready to go to cross country if required, but with the understanding that if all other competitors in your child's year level are available, they will remain at school.</b>	
<b>Departure venue, date and time:</b>	Departing to Centennial Park Eastern Precinct at 9.15am on Friday the 19 <sup>th</sup> of June	
<b>Return time:</b>	Depart Centennial Park Eastern Precinct at approx. 1pm	
<b>Excursion leader:</b>	Paul Carron	
<b>Travel details:</b>	Students will walk to and from the venue.	
<b>Excursion cost:</b>	Transport \$0 Venue entry \$0 Other \$0  <b>Total: \$0</b> <b>FUNDS DUE BY: N/A</b>	<b>Preferred Payment Methods:</b> 1. Cash or EFTPOS at office 2. EFT – Albany Primary School <b>BSB 066 040 ACC: 1990 8091</b> (Include student name and class in description)
<b>Supervisory team:</b>	Paul Carron and Amy Coetzer	
<b>Contact arrangements during excursion:</b>	APS Office: 9844 2860	
<b>Educational purpose of excursion</b>	This excursion relates to Skills for Physical Activity outlined in the Health and Phys Ed WA Curriculum.	
<b>Activities</b>	Your child will be participating in a Cross Country race.	
<b>Special clothing or other items required</b>	Students require hat, water bottle and snacks. Footwear must be worn for the race. Interschool shirts will be handed out on the morning of the event & returned by students on the day.	

**Event Schedule**

<b>Event</b>		<b>Time</b>
Course Inspection		From 9.50am
Welcome		10.20am
Year 3 Girls	1500m	10.30am
Year 3 Boys	1500m	10.45am
Year 4 Girls	1500m	11.00am
Year 4 Boys	1500m	11.15am
Year 5 Girls	2000m	11.30am
Year 5 Boys	2000m	11.45am
Year 6 Girls	2000m	12.00pm
Year 6 Boys	2000m	12.15pm

**Officials:** Each school must provide a Course Marshal on the day. If you are able to assist please email Paul Carron at [paul.carron@education.wa.edu.au](mailto:paul.carron@education.wa.edu.au)

**Weather:** Intermittent rain will not stop the event. Threats of thunderstorms (lightning) gale force winds (falling tree limbs) and severe cold may cause a cancellation.

**Parking:** There is a parking area at the precinct. All entry is via the main entrance off Brazier St.

<b>Excursion Leader signature:</b>	
<b>Principal signature:</b>	

Please complete, sign and return the section overleaf to the school by Monday 8 June
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## LOCAL AREA EXCURSION 2026

### PARENT/CARER CONSENT FORM

<b>Child's name:</b>	
<b>Class – Year:</b>	
<b>Excursion to:</b>	Centennial Park Eastern Precinct for Interschool Cross Country
<b>Student health considerations</b> <u><b>If your child's medical condition has changed or your child has special needs, please provide full details and include any relevant medical details below.</b></u>	
<b>Special considerations</b> If the proposed excursion poses any health risks in addition to those identified in the Student Health Care Summary, please outline additional health risks below: <i>e.g. if your child suffers from anaphylaxis there may be risks associated with the provision of meals and storage of an adrenaline auto injector at the appropriate temperature.</i>	
Details	
<b>Parent/carer/guardian consent</b> <b><i>Please tick each box to give your consent:</i></b>	
<input type="checkbox"/> I give permission for my child to receive medical treatment in case of emergency.	
<input type="checkbox"/> I am aware that the school and its employees are not responsible for personal injuries or property damage that may occur on an excursion, unless the school or its employees are proven to be negligent.	
<input type="checkbox"/> I give permission for my child to travel on a bus with or without seatbelts.	

OFFICIAL

<b>Emergency Contact</b>			
Name		Name	
Daytime Contact		Daytime Contact	
After hours		After hours	
Mobile		Mobile	
Relationship		Relationship	
I consent to	<i>(Your child's name)</i>		
participating in an excursion to	Centennial Park Eastern Precinct for Interschool Cross Country		
on <i>(Date)</i>	19/6/2026		
Signed			
Date			

**Please return this form and any funds for the excursion to the school by:**

**Monday 8 June**