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

ALAC

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

Excursion to:	**Albany Leisure and Aquatic Centre**	
Class/Year groups attending:	Year 6	
Departure venue, date and time:	Albany Primary School, Thursday 17 December 2026, 9am	
Return time:	2:00pm	
Excursion leader:	Virginia Mercer	
Travel details:	*Walk to ALAC, return to APS on Swan Transit Bus Service.*	
Excursion cost:	Transport $ 2:00 Venue entry $ 25:00 **Total: $27:00** **FUNDS DUE BY:** **Friday 4 December**	***Preferred Payment Methods:*** 1. Cash or EFTPOS at front office 2. EFT – **Albany Primary School** ** ***Please note our new bank details*** ** **BSB 066 040 ACC: 1990 8091** (Include student name and class in description)
Supervisory team: *(Include details of staff member with first aid responsibility)*	Virginia Mercer, Amy Coetzer & Katie Stafford	
Contact arrangements during excursion:	*School mobile: 0429 376 036* *APS Office: 9844 2860*	

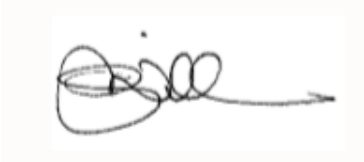
Educational purpose of excursion
This excursion has been planned to supplement the following work being completed in your child's classroom and/or is part of their education program.

Activities
Your child will be participating in the following activities.

Pool Session – swimming, water slide, inflatable obstacle course
Two ALAC lifeguards hired for the day plus participating teachers with Bronze Medallion/Surf Rescue
Court Session – basketball, cricket, roller skating, skateboarding
Helmet required to participate in skating activities.

Students may buy lunch at the kiosk or bring a packed lunch.

Special clothing or other items required All excursion participants are to comply with all venue/site special clothing or other item requirements as prescribed.
Bathers and towel for pool session School uniform and helmet for court session

Excursion Leader signature:	
Principal signature:	

Please complete, sign and return the section overleaf to the school by Friday 4 December

Yours sincerely

Virginia Mercer, Amy Coetzer & Katie Stafford

Year 6 Classroom Teachers

01 November 2026

LOCAL AREA EXCURSION 2026 & PARENT/CARER CONSENT FORM **ALAC**

Child's name:	
Class – Year:	Year 6
Excursion to:	**Albany Leisure and Aquatic Centre**

Student health considerations

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.

Special considerations

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:

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.

Details

Parent/carer/guardian consent

P*lease tick each box to give your consent:*

☐ I give permission for my child to receive medical treatment in case of emergency.

☐ 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.

☐ I give permission for my child to travel on a bus with or without seatbelts.

Emergency Contact			
Name		Name	
Daytime Contact		Daytime Contact	
After hours		After hours	
Mobile		Mobile	
Relationship		Relationship	

I consent to	*(Your child's name)*
participating in an excursion to	**Albany Leisure and Aquatic Centre**
on *(Date)*	**Thursday 17 December**
Signed	
Date	

Payment of and permissions need to be returned before 3:30pm on Friday 4 December 2026.

Payment of $27:00 can be made by cash or EFTPOS to the front office

OR

Direct Deposit to the school's CBA Bank Account BSB: 066 040 Account: 1990 8091 **with your child's name as the reference comment.**