



Melrose High School

Marr Street Pearce ACT 2607

ABN 25 459 896 375

“ A community of learners building on a tradition of excellence”



Sydney Arts Tour, 2019

Dear Parent/Carer,

The school is offering a specialised Arts Tour to Sydney focusing on the major areas of the Arts Curriculum being Drama, Dance, Music and Visual Arts. This is a wonderful opportunity for the students to participate in specialised Arts workshops, experience a live Broadway musical and a play, experience a symphony concert at the Sydney Opera House, discover the Vivid Festival, and be immersed in the Arts culture of Sydney. Some of the highlights of this year's tour include:

- ✓ **'Charlie & The Chocolate Factory' - The Musical at the Capitol Theatre**
- ✓ **'Vivid' - Sydney's annual festival of light, music and ideas**
- ✓ **'Last Night of the Proms' - Sydney Symphony Orchestra Concert, at the Sydney Opera House**
- ✓ **'A Midsummer Night's Dream' Play at the Seymour Centre**
- ✓ **Specialised Dance, Drama, Music and Visual Art Workshops**
- ✓ **Two nights' accommodation in dorm rooms (4 - 6 people per room) at the YHA The Rocks**
- ✓ **Continental Breakfast provided each morning**
- ✓ **One dinner at the YHA, and one dinner out in Sydney's CBD included**

WHEN: 5 June to 7 June 2019

TIME: Departing Melrose High School at 7.00am
Returning to Melrose High School approx. 4.00pm

STAFF: Lucy Sedlacek, Deirdre Kelaher, Tatum O'Meara & Nathan Sciberras

TRAVEL: Chartered Coach

COST: \$440

There are only **58** places available for Year 9/10 students who study an Arts elective, so places are very limited. **A deposit of \$100**, a completed medical note and permission slip must be returned to the Finance Office by **12 April 2019** to secure your child a place. If more than 58 students apply to attend this excursion they will be placed on a reserve list. **This excursion will need to be paid for in full by 10 May 2019.** *This year only online payments will be accepted.* Please contact a member of the Finance Office if you require assistance in completing an online payment. Due to the fact that tickets will need to be pre-purchased for many of these activities and shows, there will not be any financial refunds.

Yours sincerely,

The Arts Team – Melrose High School

Nathan Sciberras, Tatum O'Meara, Deirdre Kelaher, Lucy Sedlacek



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Permission Note for Sydney Arts Tour

I, _____ hereby give permission for my son/daughter _____ to attend the **Sydney Arts Tour** excursion on **5 – 7 June 2019**. I understand the transport arrangements involved.

Immediate medical needs of my child (eg. diabetic, anaphylactic, asthmatic) _____

Special dietary requirements: _____

Parent contact if needed during excursion (Necessary)

Parent/Carer: Name: _____ Phone: _____

Parent/Carer: Name: _____ Phone: _____

Staff accompanying students on excursions will take all reasonable care while students are in their charge to protect them from injury and to control and supervise their behaviour and activities. Parents should be aware that staff members are not responsible for injuries or damage to property that may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

It is customary for the school to request a financial contribution towards meeting the cost of your child’s participation in this camp/excursion. The school has made every effort to keep costs for this activity at a reasonable level. This is an enrichment activity so a payment will be required to cover all costs. The school reserves the right to cancel the activity should all costs not be covered. Individual records of contributions are confidential.

Parent/Carers Signature : _____ Date : ___ / ___ / ___

PAYMENT SLIP FOR SYDNEY ARTS TOUR Total Cost \$440 (\$100 Deposit), Teacher: KELAHER

It would be appreciated if payment was received by: **Deposit - 12 April 2019**

Full Payment – 10 May 2019

Online Payment <http://www.melrosehs.act.edu.au/payment> and follow the prompts.

Online Payment Code: ARTS TOUR

Student Name: _____

Arts Electives Enrolled In: (please circle)

DANCE DRAMA MUSIC ART PHOTOGRAPHY BACKSTAGE

Amount Paid: \$ _____

Online Payment Receipt Number: _____

Date of Payment: _____

Instructions

This form must be completed by the parent/carer of each student in an ACT public school. The form is used to request general medical information about students and provides for parents/carers to consent to first aid treatment for their child/ren in line with the directorate's First Aid Policy and First Aid General Procedures. This form must be completed annually. Parents/carers must inform the school immediately if there are any changes to the information provided within the form.

Section A – Personal Details (please fill in clearly)					
Student's Name				Date of Birth	Gender M <input type="checkbox"/> F <input type="checkbox"/>
School				School Year	
Parent/Carer Name				Address	
Telephone Contact	Mobile		Home		Business
Emergency Contact 1				Telephone	
Emergency Contact 2				Telephone	
Name of Qualified Health Professional				Telephone	

Section B – Medical Information	
Please tick if your child suffers any of the following:	
<input type="checkbox"/> Allergies	<input type="checkbox"/> Blood Pressure
<input type="checkbox"/> Anaphylaxis*	<input type="checkbox"/> Diabetes*
<input type="checkbox"/> Asthma*	<input type="checkbox"/> Eczema
<input type="checkbox"/> Epilepsy*	<input type="checkbox"/> Fainting
<input type="checkbox"/> Hay Fever	<input type="checkbox"/> Fits or blackouts
<input type="checkbox"/> Headaches	<input type="checkbox"/> Heart Condition
<input type="checkbox"/> Nose Bleeds	<input type="checkbox"/> Reaction to Drugs
<input type="checkbox"/> Sight/Hearing Problems	<input type="checkbox"/> Sun Screen Sensitivity
*Please complete and attach a <i>Known Medical Condition Response Plan</i>	
<input type="checkbox"/> Other (please specify)	
Please identify whether your child is presently taking any medication:	
	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, the parent/career must give written permission and direction for the administration of any medication at school or during school related activities, as follows:	
<ul style="list-style-type: none"> For a short term, non-ongoing medical condition (e.g. antibiotics for a period of 10 days) please complete the <i>Medication Authorisation and Administration Record</i> and provide qualified medical professional's authorisation (a copy of the medical prescription is sufficient in the case of short term administration of medication). For long term, ongoing administration of prescribed medication complete the <i>Medical Information and Consent Form</i>, the <i>Known Medical Condition Response Plan</i> and the <i>Medication Authorisation and Administration Record</i>. 	
Date of last tetanus injection	
Are you aware of any physical or psychological limitations of your child (please specify)?	
Is there any other information which you believe may be relevant to the general medical/health care of your child?	

Section C – Parent/Carer Authorisation	
<p>1. In the case of my child requiring medical treatment or in the case of a medical emergency, including an anaphylaxis or asthma emergency, I consent to:</p> <ol style="list-style-type: none"> the provision of first aid; the provision of analgesics; treatment as outlined in the attached <i>Known Medical Condition Response Plan</i> (where relevant). 	
<p>2. I authorise the school, where it is impracticable to communicate with me, to arrange for my child to receive such medical or surgical treatment as may be deemed necessary.</p>	
<p>3. I undertake to pay any costs that may be incurred for the medical treatment, ambulance transportation and medications.</p>	
<p>NB: Parents/carers should note that in the absence of a <i>Known Medical Condition Response Plan</i>, in cases of emergency excepting anaphylaxis or asthma, only standard first aid will be administered. In an anaphylaxis or asthma emergency authorised medications; salbutamol (for the symptomatic treatment of asthma), and adrenaline (for the treatment of anaphylaxis) will be administered.</p>	
Parent/Carer Signature	Date

The Directorate collects the information contained in this form to provide or arrange first aid and other medical treatments for students. The information collected will be held at the student's school and will be made available to relevant school staff, including first aid officers, and to medical or paramedical staff in the case of an accident or emergency. The information contained in the form is personal information and it will be stored, used and disclosed in accordance with the requirements of the *Information Privacy Act 2014* and the *Health Records (Privacy and Access) Act 1997*.

Office Use Only			
Student Central ID	Entered into MAZE	<input type="checkbox"/>	Date



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CODE OF CONDUCT FOR STUDENTS – Melrose Arts Tour 2019

Dear Parent/Carer,

The following details relate to the Melrose Arts Tour to Sydney, 2019.

Ensuring the safety and well-being of all students is an essential aspect of all excursions. An important part of planning and approval of excursions is to ensure that all students understand the requirements for group and personal conduct while travelling. Students should be aware that they are required to follow all group rules and instructions given by supervising teachers while travelling on the excursion. This includes instructions provided by group activity instructors to ensure group and individual safety. Supervising teachers will document all breaches of the code of conduct and they will be followed up on return to school. Serious breaches of the code of conduct may result in contact with parents/carers, a requirement for the student to pay for damage to property or the student may be required to return home at their own expense.

The following is a contract to ensure that all students are aware of the behaviour expected of them during our excursion to Sydney. By completing the contract, students acknowledge that a high standard of behaviour is expected of them whilst they are on the excursion. They are agreeing to be polite and respectful in all their dealings with instructors, teachers, the public and their peers. They agree to treat their peers with respect and value the property of others. They acknowledge that they have been informed that foolish behaviour may result in injury to themselves or others and that such behaviour will not be tolerated.

By signing this contract, students also acknowledge that they have been informed that their behaviour at school leading up to the excursion will also be a factor in deciding whether or not they will be allowed to attend the excursion.

Parents/Carers are asked to discuss the following requirements with their son/daughter, sign the code of conduct and return it to one of the teachers in the Arts Faculty by **Friday May 10, 2019.**

Yours sincerely,

The Melrose High School Arts Faculty



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Students are required to read and initial each item

In relation to the excursion to Sydney – Melrose Arts Tour 2019

- I will not enter the swimming pool at the YHA (Accommodation) during the excursion.
- I understand that school rules, as they relate to the context of this excursion, apply at all times.
- I will be aware of where I have to be and what is expected of me at all times.
- I will not leave the group without permission from a supervising teacher.
- I will at all times be with at least two other students from the excursion.
- I will be punctual and reliable.
- I will not leave the group with strangers or invite strangers to participate in group activities.
- I will respect the people and places we will visit.
- I will cooperate with the requests of the supervising teachers and venue staff.
- I will be a considerate member of the group.
- I will act courteously in dealings with others, including venue staff and members of the public.
- I will be responsible for my own belongings.
- I will keep to meeting times and places as arranged throughout the excursion.
- I will act in a responsible and positive way as an ambassador of my school and excursion group.
- I will uphold the school values of RESPECT at all times.

Violations

- I understand that students participating in the excursion are not permitted to intentionally break or damage property.
- I understand that the possession, purchase or use of cigarettes (including e-cigarettes), drugs or alcohol by students participating in the excursion is forbidden.

I understand that violating this code of conduct may result in:

- supervising teachers dealing with the issue during the excursion
- supervising teachers documenting the issue and follow up occurring on return to school
- a requirement for students to pay for damage
- contact with parents or carers to discuss the issue and possible actions, or
- a student being sent home at their own expense.

Pre-excursion agreement

- I understand that any poor behaviour choices at school leading up to this excursion may result in me not being permitted to attend the excursion.
- I understand that my travel tickets, entry fees and accommodation costs have already been paid by the school, and the cost of the excursion can not be refunded.

I acknowledge that I have been provided with the code of conduct for the excursion to Sydney 2019 and understand the consequences of violating the code of conduct.

Student's Name (Please print)
Signature **Date**/...../.....

Parent/Carer's name (Please print)
Signature **Date**/...../.....