



**Albert
Park
Primary
School**

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KAWS exhibition at the NGV
Friday 21 February 2020

7 February 2020

The grade 6 cohort will be travelling to the NGV by tram to experience the KAWS exhibition. Students will become acquainted with the characters from KAWS's world with a viewing and discussion in the exhibition. They will explore key themes including the use of art elements and materials to express emotion. Following this immersion in the works, students will participate in a workshop and create a personal companion to take home.

DATE OF EXCURSION: Friday 21 February 2020

SPECIAL LUNCH/CLOTHING REQUIREMENTS: uniform and hat must be worn. Students in the morning group will have a snack at school before leaving and have lunch when they return at 1pm. Students in the afternoon group will have an early lunch, then leave at 12:30. The afternoon group is due back at school prior to 3:30. Students may take a small bag with a drink if required.

Marion Marks, Visual Arts Specialist

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I give permission for my child: _____ of Grade: _____,

to take part in an excursion to NGV for the KAWS exhibition organised by Albert Park Primary School.

MEDICATION

Is your child taking any medicine(s)? Yes No

If yes, provide the name of medication, dose and describe when and how it is to be taken.

All medication must be given to the teacher-in-charge. All containers must be labelled with your child's name, the dose to be taken as well as when and how it should be taken. The medications will be kept by the staff and distributed as required. Inform the teacher-in-charge if it is necessary or appropriate for your child to carry their medication (for example, asthma puffers or insulin for diabetes). A child can only carry medication with the knowledge and approval of both the teacher-in-charge and yourself.

MEDICAL CONSENT

Where the teacher-in-charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher-in-charge to:

- Consent to my child receiving any medical or surgical attention deemed necessary by a medical practitioner.
- Administer such first-aid as the teacher-in-charge judges to be reasonable necessary.

Signature of Parent/Guardian: _____ Date: _____

Emergency contact number on day of Excursion: _____

I am able to help on the day* Name: _____

Phone: _____

***Please note that all parents/family members who wish to accompany an excursion must have a current Working With Children Check. While we always appreciate your help attending excursions, sometimes due to the nature of the excursion helper numbers are limited.**