



24/06/24

2024 STAGE 3 EXCURSION - THE BIG DIG
5/6N and 5/6E

Dear Parents/Caregivers,

This semester, in History, Stage 3 students have been learning about Australia in the 1800s, including the Australian colonies and what life was like for different groups of people during that time.

To consolidate their learning, students have the opportunity to visit the **Big Dig Archaeology Education centre in The Rocks**. They will take part in the hands-on 2 hour program, **Pieces of the Past**, which is targeted at years 5 & 6 with curriculum links to Stage 3 History.

Students will work as archaeologists to excavate artefacts from our indoor archaeological dig and analyse them to find out about the everyday lives of children who lived at the site of the Cumberland Street archaeology dig.

Please see the website for more information: www.sydneylearningadventures.com

Details:

Where: The Big Dig Archaeology Education centre in The Rocks

When: Friday, 5th July 2024 (**Week 10**)

What: Pieces of the Past Program

Cost: \$35.00

What to bring: Please pack a small backpack with lunch, snacks, water bottle and a hat.

Please note, students are not permitted to bring:

- devices (including smart watches, ipads and phones)
- valuable items
- money

Should these items be found in students' possession during the excursion, they will be taken by staff, stored securely and returned to parents upon returning to school.

**PLEASE RETURN THE PERMISSION SLIP AND FULL PAYMENT TO THE FRONT OFFICE BY
FRIDAY 28TH JUNE (WEEK 9)**

Kind Regards,

Stage 3 Teachers

Miss Gonnet, Mrs Semawy, Mr Nashabe, Miss El Jamalouei, Mrs Reberger

2024 STAGE 3 EXCURSION - THE BIG DIG - PERMISSION SLIP

5/6N and 5/6E

I give permission for _____ of class _____ to travel by bus, and attend **the excursion** at *The Big Dig Archaeological Education Center* in Term 3, Week 10 - Friday 5th July.

- I have paid for the excursion in full
- I have read and signed the concussion information (below)

Parent / Guardian Signature: _____

Date: ____ / ____ / ____

CONCUSSION INFORMATION

If my child is diagnosed with concussion at any time, I must inform the school and provide a medical clearance to support their return to sport and physical activity. If my child experiences a suspected concussion during school, they will be removed from the activity and medical follow-up recommended.

- I acknowledge that if my child has sustained a concussion in the lead-up to the excursion, I must provide medical clearance to the school or the supervising teacher prior to attending excursion.
- I understand that if my child sustains a concussion or suspected concussion during the excursion, they will be required to leave the excursion until medical clearance is provided to the supervising teacher.

Parent / Guardian Signature: _____

Date: ____ / ____ / ____

PERSONAL INJURY STATEMENT

- I can confirm that I understand that, in the event of injury, no personal injury insurance cover is provided by the NSW Department of Education for students in relation to this excursion.

Parent / Guardian Signature: _____

Date: ____ / ____ / ____

PLEASE RETURN THIS PAGE WITH MONEY TO THE FRONT OFFICE