



# THE WILLOWS STATE SCHOOL

*Excellence is the Standard*

## Year 6 Graduation, Disco and End of Year Fun Day

4 October 2022

Dear Parent/Carer,

Please find below some information regarding events being held for year 6 students to celebrate their final term with us at The Willows State School.

### Graduation

**When:** Tuesday 6<sup>th</sup> December at 9:15am

**Where:** The Willows State School Main Hall

**Uniform:** Official School Uniform is to be worn and **NO Senior Shirts**

**Family:** There will only be up to 2 family members able to join us in seeing our year 6 students as graduates of The Willows State School.

### Disco - Pizza Party

**When:** Wednesday 7<sup>th</sup> December

**Where:** The Willows State School Main Hall

**Time:** 5pm-7pm

**Event:** Students will be participating in a Disco and pizza party to dance and enjoy the evening with friends.

### Year 6 Fun Day at King Pin Bowling

**When:** All Year 6 classes - Thursday 8<sup>th</sup> December at 8:40am-12pm

**Where:** King Pin Bowling

**Transport:** Students will be transported to and from the Ten Pin Bowling by bus

**Uniform:** Official School Uniform or Senior Shirts are to be worn

**What to bring:** Bag, water bottle, hat, closed in shoes and morning tea

### Rite of Passage

**When:** Thursday 8<sup>th</sup> December

**Time:** 2.35pm-2.55pm

**Event:** The Rite of Passage will conclude at the trike track area at the front of the school. Parents and family can gather at the end of the passage along the fence or grassed area in front of the administration building.

### Costs:

The cost of the Bowling, Pizza Party and Graduation is \$70.00. This includes all transport, all activity costs and 1 copy of the yearbook. These events will not be invoiced separately, you will receive one invoice, covering all activities. If you wish to organise a payment plan, please contact the school office as soon as possible, to ensure the last payment is made before 17<sup>th</sup> November 2022.

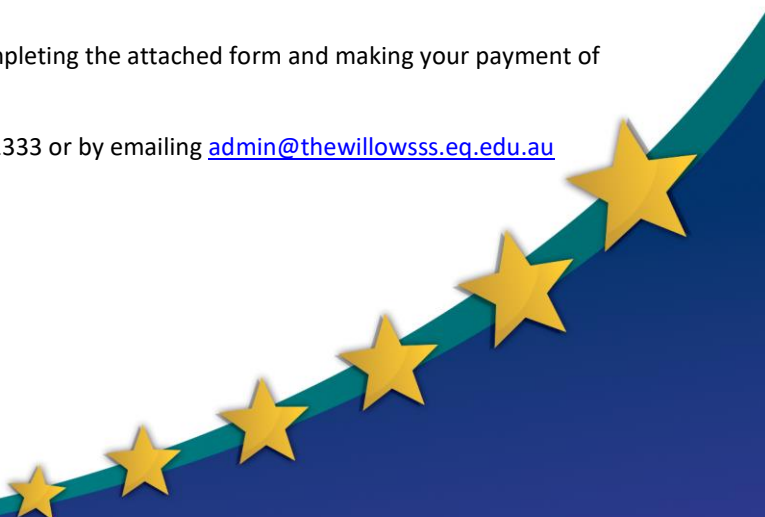
Please secure your child's place for the end of year activity by completing the attached form and making your payment of \$70.00 by Thursday 17<sup>th</sup> November 2022.

For further information please contact the school office on 4799 1333 or by emailing [admin@thewillowssss.eq.edu.au](mailto:admin@thewillowssss.eq.edu.au)

Yours sincerely

Michelle Donn  
Principal

Cameron Tod  
Deputy Principal



# Activity consent form – Year 6 Fun Day 2022

## Privacy Statement

The Department of Education is collecting the personal information in this form in order to:

- obtain consent for the named child/student to participate in the named off-site activity;
- help coordinate the off-site activity;
- respond to any injury or medical condition that may arise during or as a result of the off-site activity; and
- update school records where necessary.

Where applicable, the information is being collected in accordance with section 102 of the Education and Care Services National Regulations and the Education and Care Services Regulation 2013 (Qld).

The information will only be accessed by authorised departmental staff and stored securely. The information will be dealt with in accordance with the confidentiality requirements of, as applicable, section 426 of the Education (General Provisions) Act 2006 (Qld), the Information Privacy Act 2009 (Qld), and/or the Privacy Act 1988 (Cth). The information will not be disclosed to any other person or agency unless we have your consent or we are required or authorised by law to do so e.g. in compliance with relevant [Queensland Chief Health Officer's Directions](#).

## Activity risks and insurance

Please note that the Department of Education does not have personal accident insurance cover for children/students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide the type/s and level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow the child/student to participate in this activity.

## Consent

By signing this form, I agree to all the following statements:

- I have read all of the information contained in the *Activity consent form – Year 6 Graduation, Disco and End of Year Fun Day 2022* in relation to the activity (including any attached material)
- I am aware that the department does not have personal accident insurance cover for students.
- I give consent for the named child/student, \_\_\_\_\_ **<insert child's name>** in \_\_\_\_\_ **<insert class>** to participate in the identified activity.
- I will pay to the school the costs detailed in this consent form for the child/student's participation in the activity.
- I agree to and understand the **refund policy** as it applies to this excursion (see Activity costs)
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment the child/student may reasonably require, including contacting their doctor.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school with all relevant details of the child/student's medical or physical needs on registration /enrolment and where relevant have updated this information.
- I give consent for student contact information to be shared in relation to this activity in compliance with relevant [Queensland Chief Health Officer's Directions](#).

Parent/Carer/Student*	Name:		
	Phone number:		
	Email address:		
	Signature:		Date:

## Additional medical information

The school collected medical information about your child at registration/enrolment. This information is stored electronically in OneSchool. Please give full details of any new or updated medical information which may affect your child's full participation in the activity described in the form.

## You may also wish to update/provide the following optional information\*:

Name of child/student's medical practitioner: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Medicare No.: \_\_\_\_\_

Private Health Insurance Company (if applicable): \_\_\_\_\_ Membership No.: \_\_\_\_\_

\*If a registration/enrolment form for your child was completed or updated since October 2012 and these details have not changed, this information will already be recorded in OneSchool.

☐ I would like this additional information to be recorded in OneSchool records.