



WALLACIA PUBLIC SCHOOL
1573-1585 MULGOA ROAD
WALLACIA NSW 2745

Tel: 4773 8433
Fax: 4773 9050

Email: wallacia-p.school@det.nsw.edu.au

Principal: Mr Trev Mason

Monday 5th March, 2018

Stage 3 – HSIE - Endeavour/The Rocks Excursion.

Stage 3, (5/6) have been studying for HSIE this term 'Australian Colonies of the 1800s'. A wonderful excursion has been organised to the Australian Maritime Museum in Darling Harbour as well as a tour of 'The Rocks' area of Sydney where the first British Colony was established.

Date: Tuesday 3 April, 2018

Venues: **1. Australian National Maritime Museum – Darling Harbour.**
(One hour tour of the Endeavour.)
2. Sydney Harbour YHA, 110 Cumberland Street, The Rocks.
(Two hour tour titled 'Pieces of the Past'.)

Event Start Time: 10:00am arrival at Maritime Museum for a 10:30am tour of the Endeavour.
12:45pm arrival at the Sydney Harbour YHA for a 1:00pm tour of 'The Rocks'.

Event Finish Time: 3:00pm

Transport: We would need to meet at Penrith Railway Station 8:30am sharp. Travelling from the Maritime Museum to 'The Rocks' will be done by ferry. The return trip by train will leave Wynyard Station at 3:32pm arriving back at Penrith Railway Station at approximately 4:45pm. Therefore pick up of your child will be between 4:45pm and 5:00pm.

Cost: \$24.00 for excursion/tours.
\$12.50 (\$15 to be safe) on an 'Opal Card' to access train plus ferry.

Additional Information:

Attire: Students should wear their full school sports uniform, including a hat.

Bring: Water bottles, recess and lunch, a jumper, sunscreen preferably packed in a small backpack.

Staff member/s with CPR training: Mr Rush.

Please return to Front Office by Term 1, Week 8, Friday 23 March, 2018.

Kind Regards,

Mr John Rush
Organising Teacher

Mr Trev Mason
Principal



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Term 1, Week 8, Friday 23 March, 2018.**

I hereby give consent for my childClass:.....
to participate in the **HSIE Excursion of The Endeavour and The Rocks in
Sydney on Tuesday 3 April, 2018**

Special needs of my child, of which you need to be aware of are: (e.g. allergies,
asthma, medication)

.....
.....

To the best of my knowledge, he/she has no medical condition or injury, which puts
him/her at risk in participating in this activity:

Yes: No:

Enclosed is the \$24.00 cash

I have made an online payment of \$_____
My receipt number is _____Date paid _____

Signature of Parent / CaregiverDate:.....