



20 March 2019

Event	Year 10 History Excursion		
Location	Australian War Memorial		
Date	5 April 2019	Time	9.15am – 3.00pm
Transport	Walking	Uniform	Full Summer Uniform
Phone Contact on the day	0409 482 483 or 0408 022 526		
Return of note	No later than 3 April 2019		

Dear Parent/Guardians,

As part of the Year 10 History course, students are studying significant events of the Second World War, with particular emphasis on Australia's involvement. To increase their knowledge and level of understanding of this topic, an excursion to the Australian War Memorial (AWM) has been planned for Friday 5 April 2019.

Students are required to wear their school uniform. They should also bring sunscreen, a hat and wet weather gear if required. Students, with their teachers, will be walking to and from the Australian War Memorial. Students will also be required to bring a pencil, a clipboard and their own food and drinks for the day. Students should only carry a small bag with what they need with them for the visit. No school bags or large bags are permitted at the AWM.

Program: 09:10 Walk from the College to the Australian War Memorial, visiting the Hellenic Memorial
 10:00 Memorial staff guided tours of the galleries
 12:15 Lunch break
 13:00 Teacher guided tours of the galleries
 14:30 Walk back to the College

The contact number for the day is listed above. There will be no cost for this excursion.

Please advise the organising teacher if there is any reason your daughter cannot participate in this excursion and please remind your daughter that appropriate behaviour is expected at all times as she is a representative of the College.

For further information, please do not hesitate to contact us on 6243 4100 before the excursion.

Yours sincerely,

Karen Evans

History Teacher
Karen.evans@merici.act.edu.au

Archdiocese of Canberra and Goulburn Consent Form

Category B Excursions

Student Name	
Excursion To Australian War Memorial 5 April 2019	Return to Mrs Evans

Student Medical Details

Please detail any medical conditions (eg. Allergies, asthma) and treatment plans for your child, relevant to this excursion.	

I give permission for my daughter to attend this excursion

Parent/Guardian Signature	
Contact Number on day	
Date	