



Captain Cudgen Beachtastic Day Friday 23rd September 2022

Dear Parents / Caregivers,

This term the students have worked extremely hard to fill the Captain Cudgen box and earn their second Captain Cudgen day for the year. This term's reward is a beachtastic session on Kingscliff beach, on Friday 23rd September 2022. Travel is by bus accompanied by teachers and support staff.

K-2 and 3-6 students will rotate through a range of fun activities along the beach. These activities will **NOT** include swimming.

We will leave school at 11am and return at 1pm. Our P&C will kindly provide a sausage sizzle lunch on return to school. Canteen will not be open on this day.

What to bring:

- **Water bottle**
- **Clothes:** mufti. Students will be required to bring a jumper, wear a hat, rashies or a shirt with sleeves while in the sun. Please ensure all belongings are clearly labelled with your child's name.
- **Shoes:** students must wear enclosed shoes. Students will be able to remove shoes while on the beach
- **Sunscreen:** there will be sunscreen available during the day – it is always good to apply a well-covered layer before students come to school

Cost for bus and lunch – **FREE**

Please complete and return this note to school by Thursday 22nd September 2022.

8.55am-10.30am – Morning session in class

10.30am-10.50am – RECESS

11.00am – Depart school

11.30am – Start rotation beach activities

1.00pm Arrive back at school

1.00-1.50pm Lunch kindly provided by P&C

NO CANTEEN AVAILABLE ALL DAY

Delinda Hall & Emma Harding
PBL Co-ordinators

Renee Beach
Principal

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Permission note

I give permission for my child _____ of class _____ to travel by bus, accompanied by teachers and participate in the Captain Cudgen Beachtastic Fun day activities at Kingscliff Beach on Friday 23rd September. **I understand there will be **NO** water activities.*

Cost - \$Nil

Medical

In the event of injury or illness, I also authorise (on my behalf) the seeking of such medical assistance that my child may require. Special needs of my child of which you should be aware (eg. allergies, sensory impairment, medication etc).

Please tick one:

☐ I **give** permission for my child to receive medical treatment if necessary

☐ I **do not** give permission for my child to receive medical treatment if necessary

I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures. I acknowledge and accept that there is a risk that my child may be exposed to COVID-19 whilst attending and participating at this event. I confirm that my child will not attend if displaying any symptoms of illness, and/or if directed to isolate under public health orders.

Parent/Carer Name: _____ Signature _____

Date: _____