## **GRADE 4 AUSTRALIAN HISTORY EXCURSION**



Dear Parents/Guardians,

As part of this term's historical Inquiry, we are exploring the question 'How has our past impacted our future?' To assist the investigation we will be visiting the Melbourne Museum and Captain Cook's Cottage. Students will take part in the staff-led program, where they will work in pairs using the 'Book Creator' app on a provided iPad to create their own story about the cultural practices of the First People. They will also participate in two educational modules at Captain Cook's Cottage, learning about life in the 18<sup>th</sup> century.

WHEN:	Wednesday 6 <sup>th</sup> December	WHERE:	Melbourne Museum and Captain
			Cook's Cottage
TIME:	Depart: 9am sharp, Students to arrive at school at 8:45am.	COST:	\$26.00
	Grade 4A take bus to Cook's Cottage and then walk to the Melbourne Museum. Grade 4B take bus to the Melbourne Museum, then walk to Cook's Cottage.		(Included in the 2017 excursion levy)  Students who have not paid the EXCURSION levy in full MUST pay to attend.
	Both Grades return to Amsleigh Park by 3pm.		to attend.
WEAR	Full school uniform, including hat.	TRANSPORT:	Bus and walking
BRING:	Backpack with snack, lunch and drink bottle.		

Irene Arvanitis & Liana Kirton

<u>Please sign and return the following permission form, (and payment if required),</u> to your child's classroom teacher **before Friday 1**st **December** 

## LATE PERMISSION FORMS / PAYMENTS WILL NOT BE ACCEPTED

## APPS GRADE 4 MELBOURNE MUSEUM AND COOK'S COTTAGE EXCURSION

I give permission for my child Museum and walk to Captain Cook's Cottage or travel by bus			
return to school on the bus.	to captain cook s cottage and	wante meiseame maseam mey wii	
I enclose payment, CASH / CHEQUE / CREDIT CARE	of \$26 to cover the cost of th	is excursion.	
I have already paid \$26 as part of the 2017 excursi	on levy.		
<ul> <li>I authorise the teachers in charge of the excursion to con- receiving such medical or surgical treatment as may be d and Training (DET) does not provide personal accident ins</li> </ul>	eemed necessary and understa	•	
Parent Name:	Signature	Date:	
Contact Phone Numbers			
CREDIT CARD PAYMENT AUTHORITY - MasterCard or Visco DO NOT COMPLETE FOR A DEBIT / EFTPOS CARD — TA	-	ENERAL OFFICE FOR PROCESSING	
Student Name:	Grade: _		
Cardholders Name:		(Please print clearly)	
Signature:	Date:	Date:	
Card Expiry Date:/ Amo	ount \$ (For APPS	S GRADE 4 MUSEUM EXCURSION)	
Card number:			