



Belmay Primary School
WE CHOOSE RESPECT

The Constable Care Safety School Experience

Dear Parent/Caregiver,

The Constable Care Safety School is working to address our children's safety on the road through a unique early-intervention education approach. The school is a best-practice excursion destination for children aged 4 -11 years. It includes a purpose-built classroom complex, and a realistic layout of Perth's streets that provides students with a hands-on opportunity to learn vital pedestrian, bike and public transport travel safety skills. Featuring cutting-edge augmented reality in a simulated-risk environment, the Constable Care Safety School provides an exciting excursion opportunity for primary schools that links directly to WA curriculum outcomes.

With the assistance and support of the City of Belmont we have arranged for all of our students from year 1 to year 6 to participate in this wonderful program.

Students from Room 1 and Room 8 will be visiting the centre on May 23rd.

Students from Room 2 and Room 13 will be visiting the centre on May 30th and

Students from Room 9 and Room 14 will be visiting the centre on May 31st.

Cost of the excursion including bus will be \$11. Please complete the permission slip and return with payment in the envelope provided by Friday May 18th.



CHILD'S NAME: _____ YEAR: _____ ROOM: _____

- I give permission for my child to travel to Constable Care Safety School by bus on either May 23rd, 30th or 31st.
- I am aware that any costs incurred as a result of accident or illness are my responsibility and that school staff are not responsible for any loss or damage to my child's personal property that may occur during the course of this excursion.
- I agree to inform the organisers before the scheduled excursion departure of any changes to my child's health and fitness so that appropriate supervision may be arranged. I acknowledge that, should it be necessary, school staff will arrange to present my child for medical assessment.
- I have read and understood the information regarding the excursion and give permission for my child to participate.

NOTE: If you have not completed a MEDICAL DETAILS form or the details have changed, a new form MUST be completed before your son or daughter can attend.

Parent's Name: _____ Signed: _____ Date: _____

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