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Dear Parent / Carer / Guardian,

I am pleased to provide you with the following details regarding our upcoming incursion.

Incursion name: Living Eggs WA

Class/Year groups attending: Kindergarten and Pre-primary 1 & Pre-primary 2

Incursion date: Monday 5 August until Friday 16 August 2024

Incursion cost: \$12.50

Activities: As part of Science week this term, we will be hatching chickens in the Kindy and Pre-primary classes. A chicken hatching display will be set up in the Kindy and Pre-primary classrooms which will include an incubator, brooding box and fertilised eggs that will hatch into live chickens, all supplied to us by "LIVING EGGS WA". As a health and safety requirement and also a pre-caution, all children, staff and parent helpers will be required to wash their hands immediately after touching the eggs, chicks and feed.

Please complete, sign and return the section below to the school with payment by Thursday 1 August 2024



PARENT/GUARDIAN/CARER INCURSION CONSENT FORM

PAYMENT CAN BE MADE DIRECTLY TO THE SCHOOL'S BANK ACCOUNT

COMMONWEALTH BANK | BSB: 066-040 | ACCOUNT: 1990 6029 | REFERENCE: Surname & TA

I consent to (your child's name): _____ of TA: _____
participating in the **LIVING EGGS** on **05/8/24 – 16/8/24**.

- I have paid **\$12.50** to the school by Direct Deposit.
- I have paid **\$12.50** to the school via Qkr.
- Pre-payment has already been made to the school – **Please tick this option if you have credit held at the school**

Student health considerations: If your child's medical condition has changed or your child has special needs, please provide full details and include any relevant medical details below:

Parent/Carer/Guardian consent: I give permission for my child to receive medical treatment in case of emergency. I am aware that the school and its employees are not responsible for personal injuries or property damage that may occur on an incursion, unless the school or its employees are proven to be negligent.

Emergency Contact Name: _____ **Mobile:** _____

Signature: _____ **Date:** _____