



Website: www.nerangshs.eq.edu.au

## 7 STEM Sea World Excursion

5 August 2021

Dear Parent/Caregiver

This term our STEM students will be completing an integrated project based on Biology and Mathematics. They will be extending their theoretical knowledge of ecosystem dynamics, observing relationships between the reef species of Shark Bay as well as build upon their statistical analysis skills currently being learnt in Mathematics.

The aim of this excursion is to provide students with an engaging opportunity to observe and practice biological field work as well as to work with a genuine, large data set. Students will be enhancing their analyzing and evaluating skills, to draw conclusions about relationships within their data. They will also be increasing their proficiency with Microsoft Excel, which will assist them as they continue their studies through to Senior School.

Date of Activity:	Monday 23 August 2021 (pending the current COVID-19 restrictions)
Venue:	Sea World Theme Park, Sea World Drive, Main Beach.
Transport:	Bus
Cost:	NIL
Departure Time:	8:30am (from NSHS bus bay)
Return to school:	2:45pm (to NSHS bus bay)
Students are to bring:	Sunscreen, bottle of water and a hat.
Food arrangements:	Students may bring their own morning tea and lunch or purchase from the Sea world
	food outlets.
Clothing:	Sports uniform

Non-Participants will attend normal timetabled classes.

If you have any enquiries please do not hesitate to contact Lara Hayes on 5503 7879 or lhaye81@eq.edu.au.

Lara Hayes Head of Department

Activity Risks & Insurance: Please note that the Department of Education and Training does not have personal accident insurance cover for students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide what types and what level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow your child to participate in this activity.

<u>Privacy Notice</u>: The Department of Education and Training (DET) is collecting the personal information requested in this form in order to, obtain lawful consent for your child to participate in the activity. Help coordinate the activity, respond to any injury or medical condition that may arise during, or as a result of the activity and update school records where necessary. The information will only be accessed by authorised school staff and will be dealt with in accordance with the confidentiality requirements of s.426 of the Education (General Provisions) Act 2006 (QId) and the Information Privacy Act 2009 (QId). The information to be disclosed to any other person or agency unless it is for a purpose stated above, the disclosure is authorised or required by law, or you have given DET permission for the information to be disclosed.





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Teacher Responsible: Lara Hayes

ID: 517686

Consent:

By signing this form, I agree that:

- I have read all of the information contained in this form in relation to the activity (including any attached material) and I am aware that the Department of Education does not have personal accident insurance cover for students.
- I understand that I must have all annual school fees paid for my child's participation in the activity.
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment my child may reasonably require.
- I accept liability for all reasonable costs incurred by the Department of Education in obtaining such medical assistance or treatment and undertake to reimburse the Department of Education the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on enrolment.
- I have provided relevant updated medical information to: admin@nerangshs.eq.edu.au

I give consent for my child,			_, to participate in the Year 7	
Parent/Carer Name:			(Please Print)	
Parent/Carer's Signature:	Date:	/	/	