

**Naturaliste Community Centre Vacation Care**  
21 Dunsborough Lakes Dr, Dunsborough WA 6281  
9755 3966 Email: vacationcare@busselton.wa.gov.au

Dear Families,

**Excursion Permission Slip – Sunflower Animal Farm**

**Date:** Tuesday 1st October 2024

**From:** Naturaliste Community Centre – Dunsborough Lakes Drive

**To: Sunflower Animal Farm** (129 Ludlow-Hithergreen Rd, Ludlow)

Pet and feed the animals, have a picnic lunch and play on the playground.

**Transportation** - via DR&NK Bus Service with mandatory seatbelts and restraints to be worn that meet the safety requirements under law.

**Staffing Arrangements** – 6/7 adult staff will accompany and supervise children (ratio 1:11) during the transportation and excursion, with up to 65 children to be in attendance on the day.

**Duration**

- 10:00am Travel from NCC to Sunflower Animal Farm
- 2.00pm Depart Sunflower Animal Farm and return to NCC
- Arrive back at approximately 3:00pm

A risk assessment and written policies and procedures are available to view upon request.

**Please ensure you pack the following items for your child:**

- **Lunch box** with morning tea, lunch, afternoon tea and a water bottle
- **Pack a hat and wear closed in shoes**
  - Spare clothes in case we get wet
  - Jacket (if needed)

Please come and see us if you have any questions or concerns about the excursion. For urgent situations the supervisor for the day can be contacted on **9755 3966 or 0436 620 885**.

Thank you,  
Kayla Sermon and Sue Southern  
Naturaliste Community Centre  
Vacation Care Nominated Supervisors

**AUTHORISED PERMISSION SLIP**

I \_\_\_\_\_

give permission for my child/children: \_\_\_\_\_

to attend the excursion to **Sunflower Animal Farm** (129 Ludlow-Hithergreen Rd, Ludlow) on Tuesday 1st October 2024, travelling by DR&NK Bus Service leaving the NCC at 10.00am and returning by approximately 3.00pm.

In the event of an emergency, an accident or illness, I give permission for medical attention to be sought for my child/children and for them to be transported to the nearest available hospital or emergency centre.

Guardian name: \_\_\_\_\_ Contact number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_