Dear Parent / Caregivers

Year 6 Transition – Ballina High School
‘A taste of High School’
Years 5 and 6
Wednesday 12th and 19th August 2015 (Term 3 Weeks 5 & 6)

Moving from Primary School to High School is an exciting yet daunting time for parents and students alike. It marks the end of an era and the beginning of a new one. As part of our extensive transition program Ballina High School is offering Year 5 and 6 students from all primary schools the opportunity to attend our school for the day. During this visit your child will have the opportunity to view the school, meet some teachers and participate in a variety of classes (details in sheet attached).

Staff at Ballina High School endeavor to make this transition as smooth as possible and look forward to meeting all Year 5 and 6 students to enjoy ‘A taste of High School’ 2015.

Students are invited to attend on the following days:

- **Wednesday August 12th** – Small and Independent Schools – Students are required to make their own transport arrangements on this day.
- **Wednesday August 19th** - Ballina Public – Students will walk to Ballina High School with teachers.

Students are required to be at Ballina High School in their current school uniform by 9.30am and picked up by 2.30pm from the COLA. Limited supervision will be available in the Library until the end of the school day (3.25pm) if required, for students who may be travelling home with siblings.

Please return the signed permission note attached to the Ballina High School Front Office by Friday 31st July.

For students attending Ballina High School in 2016, Term 4 will see more programs on offer including our Friendship Building Picnic and Orientation Day. More details will be available closer to the day.

If you have any enquiries, please do not hesitate to contact the school.

Yours faithfully,

Ms Mieke Hummel
Year 6-7 Co-ordinator
28th May 2015

Mr Daniel Henman
Principal
### Activity

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description</th>
<th>Staff Member</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Music</td>
<td>Students are introduced to the Ballina High Music program and learn how technology is integrated into the art of making music.</td>
<td>Mark Willacy</td>
<td>Music</td>
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<tr>
<td>2. Art</td>
<td>Students are encouraged to bring out their creative side using clay.</td>
<td>Kathryn Davis</td>
<td>Art</td>
</tr>
<tr>
<td>3. TAS</td>
<td>Students are introduced to the TAS department in particular cooking and bake a delicious treat.</td>
<td>Odette Aitchison</td>
<td>TAS</td>
</tr>
<tr>
<td>4. Maths</td>
<td>Students are introduced to Secondary maths by undertaking a fun hands on mathematics lesson.</td>
<td>Bill Feruglio</td>
<td>M Block</td>
</tr>
</tbody>
</table>

### Schedule

<table>
<thead>
<tr>
<th>Session/Time</th>
<th>Organisation</th>
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| 9.30-10.15   | • Arrival of students at BHS  
• Address by Principal and Staff Members  
• Organisation of students into Groups  
• Year 9 Mentors allocated to Groups  
• Tour of BHS facilities including Marine Shed and Discovery Centre |
| 10.15-10.40  | Recess Break (under COLA) |
| 1. 10.40-11.30 | Group A to Activity 1  
Group B to Activity 2  
Group C to Activity 3  
Group D to Activity 4 |
| 2. 11.30-12.15 | Group A to Activity 2  
Group B to Activity 3  
Group C to Activity 4  
Group D to Activity 1 |
| 12.15-1.00   | Lunch Break (Next to ALC) |
| 3. 1.00-1.45  | Group A to Activity 3  
Group B to Activity 4  
Group C to Activity 1  
Group D to Activity 2 |
| 4. 1.45-2.30  | Group A to Activity 4  
Group B to Activity 1  
Group C to Activity 2  
Group D to Activity 3 |
| 2.30         | Students return to COLA to meet with teachers in preparation for dismissal |

- **Recess** – Students to provide their own  
- **Lunch** – BBQ lunch provided on grass near Volleyball courts  
- Students will be allocated mentors
Excursion Consent Form – Year 6 Transition – Ballina High School
‘A taste of High School’

I hereby consent to ________________________________________(student name) participating in the Year 5/6 Transition – ‘A taste of High School’ visit on:  (Please tick)

☐ Wednesday August 12th (Small/Independent school)
☐ Wednesday August 19th (Ballina Public)

Please state which school your child currently attends

24 HOUR EMERGENCY CONTACT DETAILS
Mother/carer name ______________________________ Phone ______________________ Mobile_________________
Father/carer name ______________________________ Phone ______________________ Mobile_________________

REFUNDS POLICY
On occasions there are unforeseen circumstances that may prevent your child from attending this event. If for any reason through a school error that your child cannot attend, your money will be refunded. If the fault does not lie with the school, it cannot be responsible for covering the loss of funds if your child does not attend, therefore there will be no refunds.

All excursions money and notes need to be in two days before the excursion date.

MEDICAL INFORMATION
The information provided on (date)____________________is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about (student name) ________________________ who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Ballina High School.

It will be used by officers of the NSW Department of Education and Training to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide healthcare treatment or other assistance during or as a consequence of such excursions or activities.

Provisions of this information are not required by law. However, a failure to provide the information may mean that your child

 cannot participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

You may correct any personal information provided at any time by contacting the school office.

MEDICAL DETAILS
Medicare Number _______________________________ Private Health Insurance _______________________________
Preferred Doctor _______________________________ Phone _______________________________

Does this student suffer from?
Diabetes ☐ Asthma ☐ Epilepsy ☐ Migraine ☐ Allergies ☐ Adverse reaction to medication ☐ Other ☐

Medical Alert (anaphylactic shock, allergy, medication, etc) ________________________________________________

Last Tetanus shot __________________________ Last 6 months ☐ Last 1 year ☐ Last 5 years ☐

I understand that this medical form covers the above mentioned child for the excursion/activity mentioned above.

Please sign below to indicate your agreement
(i) to the information contained in the Excursion Details letter and conditions indicated above.
(ii) that the information provided is accurate and current.

By signing this you agree that your student will be bound by the Ballina High School Code of Conduct for Excursions and the school’s Welfare and Discipline Policy.

Name of Parent/Caregiver:__________________________________________________________

Signature of Parent/Caregiver:__________________________________________ Date:________

Please return form to EVPS by Tues 28th July 2015 (EVPS to send to Ballina High School by Fri 31st July)