Kia ora whānau,

Please find attached a digital copy of all the permission slips required for your child to attend the experiences detailed in the Wider Learning Opportunites schedule this year and shown in the image below.

Please note the <u>Cross Country, Year 1 EOTC Day & Yr 2 Camp</u> information & permission slips will all be <u>sent seperately later in the year.</u>
As we are a large team, there are 3 trips to Auckand Museum. Please ensure you are returning the permission slip with the correct date for your child's class.

\*\*You are welcome to sign and return these permissions all in Term 1, or before the deadline of each trip (detailed on the forms)\*\*
\*\*Payment for each trip is via the School Shop. Again, this can be made all in Term 1, or before the deadlines given on the forms\*\*

There are paper copies of all the forms and details available from your child's class teacher. Please ask should you require.

Thank you to all whānau who are able to offer help for these trips. Please note, we won't be able to accept all offers of help and parent help is not allocated on a first come, first serve basis.

In the case your help is required, you will be contacted directly via email closer to the time of each trip.

Kind regards, The Purapura Team

| Vider Learı                     | ning Opportunities 202              | 23                            |   |  |
|---------------------------------|-------------------------------------|-------------------------------|---|--|
| - 172 ·                         |                                     | PURAPURA WI                   | HANAU (YEAR 1 & 2)  |  |
|                                 | Term 1                              | Term 2                        | Term 3  | Term 4   |
| WIDER<br>LEARNING<br>ACTIVITIES | Beach Day at Okoromai Bay -<br>\$10 | Museum Trip - \$30            | Zoo Ventures @ GHS- \$20                                      | Beach Day at Okoromai Bay<br>\$10<br>Life Education Visit - \$12 |
|                                 |                                     |                               | Cross-Country at Shakespear<br>(transport) - \$5              |  |
|                                 |                                     |                               | Y2 'New Adventures' Experience<br>Sleepover - \$50 (optional) |  |
|                                 |                                     |                               | Yr1 EOTC Experience day @ school \$20                         |  |
|                                 | Total - \$ 107                      | Per Y1 Child / Total - \$ 137 | Per Y2 Child (Sleepover Optional)                             |  |

|                         | Gulf Harbour So   | chool Trip Notification                     | ı                                   |  |
|-------------------------|---|---|-------------------------------------|--|
| Room                    | All Purapura Whānau   | Date of Trip                                | Wednesday April 5th 2023            |  |
| Venue                   | Okoromai Bay  | Cost  | \$10                                |  |
| Teacher in Charge       | Abigail Copley  |   |                                     |  |
| Purpose of Trip         | We are visiting as a continuation & celebration   | of our work on water safety                 |                                     |  |
| What to bring           | Plenty to eat for the day in a clearly labelled bay<br>spare bag for wet clothes                    | g, full, named water bottle, mufti clothes, | sun cream & sun hat, togs and a tow |  |
| Schedule                | Departing School time   |   | 9.30am                              |  |
|                         | Back at school time   |   | 2.30pm                              |  |
| Help Required           | We welcome whānau help- please complete the Please note, you will be responsible for the            |   | for the duration of the trip        |  |
| Approval                | This trip and the various management requirements have been reviewed and approved by the Principal. |   |                                     |  |
|                         | Signed  |   |                                     |  |
| Consent                 | Please complete the following permission s  | lip and return to your child's teacher b    | pefore Monday March 13th, 2023.     |  |
|                         | Co  | nsent Form                                  |                                     |  |
| Students Name           |   | Trip  | Okoromai Bay                        |  |
| Room                    |   | Date  | Wednesday April 5th                 |  |
| Emergency Contact:      |   | Cost  | \$10                                |  |
|                         | this trip and will ensure payment is made pri   | or.   |                                     |  |
| Signed                  |   |   |                                     |  |
| I give my consent for n | ny child to enter the water, with a ratio of 1 adult to   | 2 children and no more than 6 children in   | the water at any one time.          |  |
| Signed                  |   |   |                                     |  |
| I am able to help if n  | eeded   |   |                                     |  |
| Name                    |   |   |                                     |  |
| Contact Number          |   |   |                                     |  |

|                        | Gulf Harbour School Trip  | Notification            |                              |
|------------------------|---|-------------------------|------------------------------|
| Room                   | 10, 4, 1, 9 (only half of Rm 9 see Hero for details)  | Date of Trip            | Monday June 19th 2023        |
| Venue                  | Auckland War Memorial   | Cost                    | \$30                         |
| Teacher in Charge      | Abigail Copley  |                         |                              |
| Purpose of Trip        | We are visiting as a celebration of our work on Cultural Diversity  | in Term 2 and to launch | our theme for Term 3         |
| What to bring          | Plenty to eat for the day in a clearly labelled bag, full & named water bottle, wearing school uniform  |                         |                              |
| Schedule               | Departing School time   |                         | 8.45am                       |
|                        | Back at school time   |                         | 3.15pm                       |
| Help Required          | We welcome whānau help- please complete the slip below.  Please note, you will be responsible for the supervision small groups of children for the duration of the trip |                         |                              |
| Approval               | This trip and the various management requirements have been   | reviewed and approved   | by the Principal.            |
|                        | Signed  |                         |                              |
| Consent                | Please complete the following permission slip and return to   | your child's teacher b  | efore Monday May 22nd, 2023. |
|                        | Consent Form  |                         |                              |
| Students Name          |   | Trip                    | Auckland War Memorial        |
| Room                   |   | Date                    | Monday June 19th 2023        |
| Emergency Contact      |   | Cost                    | \$30                         |
| l give my consent to   | this trip and will ensure payment is made prior.  |                         |                              |
| Signed                 |   |                         |                              |
| I am able to help if n | leeded  |                         |                              |
| Name                   |   |                         |                              |
| Contact Number         |   |                         |                              |

|                        | Gulf Harbour School Trip  | Notification                     |                          |  |
|------------------------|---|----------------------------------|--------------------------|--|
| Room                   | 11, 5, 13, 9 (only half of Rm 9 see Hero for details)   | Date of Trip                     | Wednesday June 21st 2023 |  |
| Venue                  | Auckland War Memorial   | Cost                             | \$30                     |  |
| Teacher in Charge      | Abigail Copley  |                                  |                          |  |
| Purpose of Trip        | We are visiting as a celebration of our work on Cultural Diversity in   | n Term 2 and to launch our the   | me for Term 3            |  |
| What to bring          | Plenty to eat for the day in a clearly labelled bag, full & named wa  | ter bottle, wearing school unifo | rm                       |  |
| Schedule               | Departing School time   |                                  | 8.45am                   |  |
|                        | Back at school time   |                                  | 3.15pm                   |  |
| Help Required          | We welcome whānau help- please complete the slip below.  Please note, you will be responsible for the supervision sma | Il groups of children for the d  | uration of the trip      |  |
| Approval               | This trip and the various management requirements have been reviewed and approved by the Principal.                   |                                  |                          |  |
|                        | Signed  |                                  |                          |  |
| Consent                | Please complete the following permission slip and return to your  | child's teacher before Monday    | n May 22nd, 2023.        |  |
|                        | Consent Form  |                                  |                          |  |
| Students Name          |   | Trip                             | Auckland War Memorial    |  |
| Room                   |   | Date                             | Wednesday June 21st 2023 |  |
| Emergency Contact      |   | Cost                             | \$30                     |  |
| l give my consent to   | this trip and will ensure payment is made prior.  |                                  |                          |  |
| Signed                 |   |                                  |                          |  |
| I am able to help if n | reeded  |                                  |                          |  |
| Name                   |   |                                  |                          |  |
| Contact Number         |   |                                  |                          |  |

|                        | Gulf Harbour S  | School Trip Notification                                      |                            |  |
|------------------------|---|---|----------------------------|--|
| Room                   | 12, 3, 14   | Date of Trip  | Thursday June 22nd 2023    |  |
| Venue                  | Auckland War Memorial   | Cost  | \$30                       |  |
| Teacher in Charge      | Rhiannon Le Sueur   |   |                            |  |
| Purpose of Trip        | We are visiting as a celebration of our work of   | on Cultural Diversity in Term 2 and to launch o               | our theme for Term 3       |  |
| What to bring          | Plenty to eat for the day in a clearly labelled   | bag, full & named water bottle, wearing school                | ol uniform                 |  |
| Schedule               | Departing School time   |   | 8.45am                     |  |
|                        | Back at school time   |   | 3.15pm                     |  |
| Help Required          | We welcome whānau help- please complete Please note, you will be responsible for the                | the slip below.<br>ne supervision small groups of children fo | r the duration of the trip |  |
| Approval               | This trip and the various management requirements have been reviewed and approved by the Principal. |   |                            |  |
|                        | Signed  |   |                            |  |
| Consent                | Please complete the following permission s  | lip and return to your child's teacher before N               | Monday May 29th, 2023.     |  |
|                        |   | Consent Form  |                            |  |
| Students Name          |   | Trip  | Auckland War Memorial      |  |
| Room                   |   | Date  | Thursday June 22nd 2023    |  |
| Emergency Contact      |   | Cost  | \$20                       |  |
|                        | this trip and will ensure payment is made   | prior.  |                            |  |
| Signed                 |   |   |                            |  |
| l am able to help if n | eeded   |   |                            |  |
| Name                   |   |   |                            |  |
| Contact Number         |   |   |                            |  |

|                        | Gulf Harbour Sc  | hool Trip Notifica             | ation                        |
|------------------------|--|--------------------------------|------------------------------|
|                        |  |                                |                              |
| Room                   | All Purapura   | Date of Trip                   | WB August 14th               |
| Venue                  | @ GHS  | Cost                           | \$20                         |
| Teacher in Charge      | Abigail Copley   |                                |                              |
|                        |  |                                |                              |
| Purpose of Trip        | A workshop called 'Animal enhance our curriculum exp<br>Your child's class will visit of | perience during our 'Curios    |                              |
|                        |  |                                |                              |
| What to bring          | N/A  |                                |                              |
|                        |  |                                |                              |
| Schedule               | Departing School time  |                                | NA                           |
|                        | Back at school time  |                                | NA                           |
|                        |  |                                |                              |
| Help Required          | NA   |                                |                              |
| Approval               | This trip and the various manage Principal. Signed                                       | ement requirements have been i | reviewed and approved by the |
|                        | Signed   |                                |                              |
| Consent                | Please complete the following before Tuesday July 18th, 2023                             |                                | your child's teacher         |
|                        |  |                                |                              |
|                        | Con  | sent Form                      |                              |
|                        |  |                                |                              |
| Students Name          |  | Trip                           | Zoo Ventures                 |
| Room                   |  | Date                           | WB August 14th               |
| Emergency Contact:     |  | Cost                           | \$20                         |
|                        | this experience and will ensure  | payment is made prior.         |                              |
| Signed                 |  |                                |                              |
| I am able to help if n | eeded  |                                |                              |
| Name                   |  |                                |                              |
| Contact Number         |  |                                |                              |

|                           | Gulf Harbour Sch  | nool Trip Notifica         | ntion                       |
|---------------------------|---|----------------------------|-----------------------------|
|                           | All D   | D. (                       | 0.404.054                   |
| Room                      | All Purapura  | Date of Trip               | Oct 9th-25th                |
| Venue                     | @ GHS   | Cost                       | \$12                        |
| Teacher in Charge         | Abigail Copley  |                            |                             |
| Purpose of Trip           | Workshops around making<br>our school by Life Education<br>our 'Communication' focuse<br>period             | n Trust to enhance our cur | riculum experience during   |
| What to bring             | N/A   |                            |                             |
|                           |   |                            |                             |
| Schedule                  | Departing School time   |                            | NA                          |
|                           | Back at school time   |                            | NA                          |
| Help Required             | NA  |                            |                             |
| Approval                  | This trip and the various management requirements have been reviewed and approved by the Principal.  Signed |                            | eviewed and approved by the |
| Consent                   |   |                            |                             |
|                           | Con   | sent Form                  |                             |
|                           |   |                            |                             |
| Students Name             |   | Trip                       | Life Education              |
| Room                      |   | Date                       | Oct 9th-25th                |
| <b>Emergency Contact:</b> |   | Cost                       | \$12                        |
| I give my consent to      | this trip and will ensure paymer  | nt is made prior.          |                             |
| Signed                    |   |                            |                             |
|                           |   |                            |                             |

|                         | Gulf Harbour S  | School Trip Notificatio                     | n                             |  |
|-------------------------|---|---|-------------------------------|--|
| Room                    | All Purapura Whānau   | Date of Trip                                | Friday Dec 8th 2023           |  |
| Venue                   | Okoromai Bay  | Cost  | \$10                          |  |
| Teacher in Charge       | Abigail Copley  |   | <b>V</b> 10                   |  |
| Purpose of Trip         | We are visiting as a celebration of our year to   | ogether                                     |                               |  |
| What to bring           | Plenty to eat for the day in a clearly labelled bag, full & named water bottle, mufti clothes, sun cream & sun hat, togs and a towel, spare bag for wet clothes         |   |                               |  |
| Schedule                | Departing School time   |   | 9.30am                        |  |
|                         | Back at school time   |   | 2.30pm                        |  |
| Help Required           | We welcome whānau help- please complete the slip below.  Please note, you will be responsible for the supervision small groups of children for the duration of the trip |   |                               |  |
| Approval                | This trip and the various management requirements have been reviewed and approved by the Principal.   |   |                               |  |
| ••                      | Signed  |   |                               |  |
| Consent                 | Please complete the following permission  | slip and return to your child's teacher     | before Monday November 13th.  |  |
|                         | C   | Consent Form                                |                               |  |
| Students Name           |   | Trip  | Okoromai Bay                  |  |
| Room                    |   | Date  | Friday Dec 8th                |  |
| Emergency Contact:      |   | Cost  | \$10                          |  |
|                         | this trip and will ensure payment is made p   | prior.                                      |                               |  |
| Signed                  |   |   |                               |  |
| I give my consent for n | ny child to enter the water, with a ratio of 1 adult  | to 2 children and no more than 6 children i | in the water at any one time. |  |
| Signed                  |   |   |                               |  |
| I am able to help if n  | eeded   |   |                               |  |
| Name                    |   |   |                               |  |
| Contact Number          |   |   |                               |  |