<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
<th>Cost</th>
<th>Amount Pd</th>
</tr>
</thead>
<tbody>
<tr>
<td>Swimming Program</td>
<td>2nd – 11th November</td>
<td>$95.00</td>
<td></td>
</tr>
<tr>
<td>Level 1 Dinner</td>
<td>2nd December</td>
<td>$ 6.00</td>
<td></td>
</tr>
<tr>
<td>Melbourne Zoo Excursion</td>
<td>9th December</td>
<td>$30.00</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>$131.00</strong></td>
<td></td>
</tr>
</tbody>
</table>

Child’s name: ............................................................

Grade: ..................

Please tick:
I will pay for my child’s excursion and activity expenses by:

- [ ] Payment by BPAY (refer to your family statement for BPAY Reference No.)
- [ ] Payment by Cheque/ Cash (payment enclosed)
- [ ] Payment as activities arise (before the activity occurs)

Signed: ................................................................. Date: .............

Parent / Guardian
Dear Parents

An excursion to The Melbourne Zoo has been arranged for Friday 9th December as part of the Foundation students’ term 4 integrated topic ‘Living Things’.

We will participate in a Zoo Education Discovery session where the children will investigate various wildlife species through a range of interactive activities. The remainder of our day will be spent exploring the wonderful environment and exhibits the zoo has to offer.

The cost of the excursion is $30.00 which includes transport by bus, admission to the zoo and participation in the Education Discovery Centre program.

We will depart at 9.30am. Children will need to bring snacks, lunch and a drink in their school bag. They also need to wear school uniform including their school hat.

We hope that all students will participate in this excursion. Please complete the permission form below and return it to school.

Please note we need the excursion permission slips below signed and returned to the school for your child to attend this excursion.

Thanking you,
Foundation Teachers Amy and Di

Teacher copy

Templestowe Heights Primary School
Foundation Melbourne Zoo Excursion

I give permission for my child ____________________________ of grade ______ to attend the excursion to the Melbourne Zoo on 9th December 2016

Please tick whichever is applicable:

I have enclosed $30, which is full payment for the activity

OR

I have made payment with the Term 4 levy.

I authorise the teacher in charge of the excursion to consent, where it is impractical to communicate with me, to the child receiving such medical or surgical treatment as may be deemed necessary.

Signature of parent or guardian: .................................................................

Emergency contact number: .................................................................

Office Copy

Templestowe Heights Primary School
Foundation Melbourne Zoo Excursion

I give permission for my child ____________________________ of grade ______ to attend the excursion to the Melbourne Zoo on 9th December 2016

Please tick whichever is applicable:

I have enclosed $30, which is full payment for the activity

OR

I have made payment with the Term 4 levy.

Signature of parent or guardian: .................................................................

Emergency contact number: .................................................................
September, 2016

Dear Parents

This year we have planned a dinner and games night at school on Friday 2\textsuperscript{nd} of December. The children will enjoy pizza and an icy pole for dinner, followed by games with the 1/2 children.

The children will be required to arrive at school on Friday night at 6:00pm and meet in the Grade 1 & 2 Learning Space.

\textbf{There will be a cost of $6 for dinner and games.}

\textit{Foundation Teachers}

________________________________________

I give permission for my child \underline{__________________________} of year \underline{______________} to attend the Foundation dinner and games night on Friday 2\textsuperscript{nd} December.

I authorise the teacher in charge of the excursion to consent, where it is impractical to communicate with me, to the child receiving medical treatment as may be deemed necessary.

I have enclosed $6.00

Paid by BPAY

Signature of Parent/Guardian: \underline{__________________________________________}

Emergency Telephone Contact: \underline{__________________________________________}
Dear Parents,

Thank you for the prompt return of the ‘Swimming Expression of Interest’ notices. Program details are now in place.

- The Swimming Program will run from Wednesday 2nd of November until Friday 11th of November for Foundation, Year 1 and 2 classes.
- There will be 3 session times from 11:00am-11:45am, 11:45am-12:30pm and 12:30pm-1:15pm.
- The cost per child will be $95 which covers pool entry, instructor’s fees and transport by seat belted bus to and from the pool.
- Thongs may be worn to and from the pool.
- Please ensure all clothing, towels, goggles, swim caps and thongs are clearly labelled with your child’s name and school. For hygiene reasons we encourage students to wear a swimming cap in the pool.
- Students will be placed into groups according to ability. If your child has a logbook please bring it to school. Children will receive a certificate upon completion of the Swimming Program.
- Refunds are available for children who are absent multiple days (swim lesson component only, credited to your school account).

_Thank you for your continued support of this very important program._

2016 SWIMMING PROGRAM

I give permission for my child ____________________________ in year ______ to take part in the Swimming Program from 2nd - 11th November at Doncaster Aquarena.

I enclose $95 being the cost of the program

I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to the child receiving such medical or surgical treatment as may be deemed necessary.

Signature Parent/Guardian: ____________________________

Emergency Telephone Contact: ____________________________