

## Children's Book Week 2020



Attadale  
Primary School

Foundations for life

2 September 2020

Dear Parents

This year Children's Book Week is being celebrated Monday 19 – Friday 23 October 2020.

**Dress up as a book character day is Friday October 23.**

Local author/illustrator James Foley will be in residence Monday October 19 and Wednesday October 21.

James started his career drawing covers for the Quokka newspaper in 2003. He went on illustrating and creating cartoons freelance and working various jobs in rural Australia. James loves presenting to children.

Students from Pre Primary through to Year 6 will have an informative and entertaining session with James in the school library.

Please return the permission slip by Friday 18 September 2020

Any queries please don't hesitate to contact me.

Regards

Elise White

Librarian

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### Children's Book Week 2020

I consent to \_\_\_\_\_ Room # \_\_\_\_\_ participating in an incursion with James Foley in the Attadale Primary School library.

I have enclosed \$5.00 as payment.

I give permission for my son/daughter to receive medical treatment in case of emergency.

I am aware that the school and its employees are not responsible for personal injuries or property damage which may occur on an excursion, unless the school or its employees are proven to be negligent.

Signed.....(Parent/guardian)

Date.....

Attadale Primary School Wichmann Road Attadale WA 6156

School Office: 08 9330 3422 Fax: 08 9330 7486 Email: [attadale.ps@education.wa.edu.au](mailto:attadale.ps@education.wa.edu.au)

[attadaleps.wa.edu.au](http://attadaleps.wa.edu.au)

## Attadale Primary School - Money Collection Envelope

Attadale Primary School  
BSB 066 163  
ACC 0090 3316

Student name: \_\_\_\_\_ Room #: \_\_\_\_\_

Name of excursion/incursion: \_\_\_\_\_ (Permission slip enclosed)

Payment method: Cash  Cheque  Credit card  Bank transfer  Upfront Payment

Cash/Cheque Amount: \$ \_\_\_\_\_

Type of Card: Visa  Mastercard

Credit Card No: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Expiry Date: \_\_\_\_\_/\_\_\_\_\_(MM/YY)

Bank Transfer:

Amount \$: \_\_\_\_\_

(Please use Student Name as Ref #)

Transfer receipt #: \_\_\_\_\_