

27 November 2020

Year 1 End of Year Excursion
Spare Parts Puppet Theatre, Esplanade Park and Cicerellos



Dear Parents,

To celebrate the end of Year One, Miss Boot and Ms Brooks are taking the Year Ones for an **End of Year Excursion to Fremantle**. We are excited to take the students to see a performance at the **Spare Parts Puppet Theatre**. We will begin the day with an early recess at school before departing at **9:15**. We will then head straight to the theatre for a 10:00 performance. Following the performance, we will walk to **Esplanade Park Fremantle** for a play, followed by lunch at **Cicerellos at 12:30pm**. After lunch we will have a final play at the **Esplanade Park Fremantle** before departing the park at **2pm**.

Cost of the excursion includes travel to and from Fremantle, admission to the performance and a fish and chip lunch at Cicerellos. If your child has any dietary requirements, please see your individual teacher to discuss this.

Date: 14th December 2020

Depart school: 9:15 am

Return to school: 2:30 pm

What to Bring: Hat, sunscreen, water bottle.

Attire: School uniform (weather appropriate) and comfortable walking shoes.

Cost: \$20.50

Please return the permission slip by **7 December 2020**

Please label all of your child's belongings and if you have any queries, please don't hesitate to contact me.

Regards

Mairi Brooks and Gemma Boot

Year 1 Teachers

Year 1 End of Year Excursion
Spare Parts Puppet Theatre, Esplanade Park and Cicerellos

I consent to _____ Room # _____ participating in an excursion to the **Spare Parts Puppet Theatre, Esplanade Park and Cicerellos** on **14/12/20**.

I have enclosed **\$20.50** 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**

Foundations for life

ATTADALE PRIMARY SCHOOL – PAYMENT SLIP

Student: _____ Room # _____

Name of event: _____ Permission Slip attached:

Payment Amount: \$ _____ Payment Method: *Please circle*

Cash / Cheque / Credit Card / Bank Transfer/ Upfront Payment (Deduct from Account)

C/C # _____ / _____ / _____ / _____ Exp: ____ / ____

Signature of Cardholder: _____

Attadale PS: BSB 066 163 Account 0090 3316 Transfer receipt #: _____
(Please use name as reference)

