



## Applecross Primary School

65 Kintail Road Applecross WA 6153

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[www.applecrossps.wa.edu.au](http://www.applecrossps.wa.edu.au)

Dear Parents and Carers

### **BALLROOM DANCING – TERM 4**

Students in Year 6 will begin their Ballroom Dancing lessons in Term 4.

The lessons will be conducted by Geoff Chisholm, an experienced professional dancing instructor and includes the Jive, Samba, Waltz, to name but a few.

The children will have 10 hours of tuition culminating with a presentation of dances during their Graduation Dinner on 18 December. Further information about the Graduation Dinner will be sent home next term.

Lessons will commence in the second week of Term 4 as follows.

- Lesson 1: Monday 21 October (2pm – 3pm)
- Lesson 2: Monday 28 October (2pm – 3pm)
- Lesson 3: Monday 04 November (2pm – 3pm)
- Lesson 4: Monday 11 November (2pm – 3pm)
- Lesson 5: **Wednesday** 13 November (2pm – 3pm)
- Lesson 6: Monday 25 November (2pm – 3pm)
- Lesson 7: Monday 02 December (2pm – 3pm)
- Lesson 8: Monday 09 December (2pm – 3pm)
- Lesson 9: **Wednesday** 11 December (2pm – 3pm)
- Lesson 10: **Wednesday** 18 December (Dinner Dance Night)

The cost per student for the 10 hours is **\$30.00**. Please return the attached Parent Permission and Payment Form to the locked box in the school office with the correct money (if paying cash) by **Friday 18 October 2019**.

Yours sincerely

Louis Shepherd  
Deputy Principal  
14 October 2019

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**Parent Permission and Payment Form**  
**Ballroom Dancing 2019**

**Where:**            **Applecross Primary School**

**When:**            Term 4

**The cost will be:** \$30.00

**Please sign and return this permission slip together with **correct money** (if paying cash) to the front office by **Friday 18 October 2019**.**

I have read and understood the information regarding Ballroom Dancing lessons in Term 4 and give consent for my child to attend.

**Child's Name:** \_\_\_\_\_ **Room Number:** \_\_\_\_\_

**Signed: (Parent/Guardian)** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**PAYMENT OPTIONS** \* CASH

\* CREDIT CARD - **Visa & Mastercard**

\* CHEQUE - payable to '**Applecross Primary School**'

\* DIRECT DEPOSIT - ANZ Booragoon **BSB 016-267 Account No 3408 67399** (Please use your child's **Name** and **Room No** as **reference** and **email confirmation** of payment to [Applecross.ps@education.wa.edu.au](mailto:Applecross.ps@education.wa.edu.au))

**PLEASE COMPLETE ALL DETAILS:**

Payment Type:  Cheque

Cash

Credit Card

Visa     Mastercard

**CREDIT CARD NO: (PLEASE PRINT CLEARLY)**

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**EXPIRY DATE: (PLEASE PRINT CLEARLY)**

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\_\_\_\_\_  
CARD HOLDER'S NAME

\_\_\_\_\_  
CARD HOLDER'S SIGNATURE

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