



Applecross Primary School

65 Kintail Road Applecross WA 6153

Phone: 08 9364 1792 Fax: 08 9316 3207

Email: applecross.ps@education.wa.edu.au
www.applecrossps.wa.edu.au

Dear Parents/Caregivers,

MDISSA Interschool Sofcrosse Carnival – Friday 5 April 2019

Your child has been selected to represent Applecross Primary School at the upcoming MDISSA Interschool Sofcrosse Carnival, which is to be held on **Friday 5 April 2019** at Tompkins Park.

Students will travel to the venue by bus which is departing at 8:50am for a 9:10am start and returning at approximately 2:45pm.

Applecross PS staff will be supervising the event as follows:

- Derek Rijnhart
- Steph Wilson
- Orla King

Students should bring the following:

- Packed Recess and Lunch
- Water Bottles
- Sun Cream
- Medical requirements such as Asthma puffer and spacer

Students are required to wear **full school uniform**, including:

- Applecross PS **charcoal polo shirt (no leavers shirt)**
- Applecross PS hat
- Applecross PS charcoal skorts or shorts
- Good running shoes

The cost of the Sofcrosse Carnival is \$7.75. Please return the **Parent Permission and Payment Form** along with correct money (if paying cash) in a sealed and labelled envelope to the locked box in the front office by **Friday 29 March 2019**.

Good luck to all competitors!

We require 1 parent volunteer to manage a team on the day. You will need to be able to help for the duration of the carnival from 9:10am until 2:30pm. If you are able to do this please contact me on the email below.

Yours sincerely,

Mr Derek Rijnhart
Physical Education Specialist
25 March 2019

Derek.rijnhart@education.wa.edu.au

Parent Permission and Payment Form

MDISSA Interschool Sofcrosse Carnival

Where: Tompkins Park

When: Friday 5 April 2019

Time: Departing at 8:50am returning at approximately 2:45pm

The cost will be \$7.75 per student. **Please sign and return this permission slip and correct money (if paying cash) to the locked box in the front office before Friday 29 March 2019.**

I have read and understood the information regarding the excursion to Tompkins Park on **Friday 5 April** and give consent for my child to attend the MDISSA Interschool Sofcrosse Carnival travelling **by bus**.

Child's Name: _____ **Room Number:** _____

Signed: (Parent/Guardian) _____ **Date:** _____

Phone Number: _____

Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities. Parents/guardians should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. **Parents are required to inform the organisers well before the scheduled excursion departure of any change to their child's health and fitness so that appropriate supervision may be arranged.** Where it is considered necessary, school staff will arrange medical assessment and treatment for students.

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)

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