



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 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 should warn children of the risk to themselves, to others and to property of impulsive, wilful or disobedient behaviour.

31 October 2017

**Year 6 Graduation & Dinner**

The Year 6 graduation assembly, dinner and disco will be held on Tuesday 12th of December 2017.

The graduation assembly will be held in the Theodore Primary School Hall starting at 5pm. We would love family and friends to attend.

Parents and carers are asked to then transport students to the function room at the Calwell Club for the dinner and disco. This will start at 6pm and students will need to be picked up at 9pm from the function room.

The cost of the dinner is \$25 and all other costs have been covered through the Year 6 fundraisers. Please return the payment by Friday 24<sup>th</sup> November 2017 (Week 7).

**Graduation details:**

- Date:** Tuesday 12<sup>th</sup> December
- Time:** Graduation Ceremony –Theodore Primary School Hall- 5pm
- Location:** Graduation Dinner & Disco –Calwell Club – 6pm
- Cost:** \$25.00

We look forward to seeing you at the graduation assembly,

Jodie White, Briana Gracie, Josh Gurr, and Alice Lowes

**Permission Note**

I give permission for my child .....  
in class .....to attend the Year 6 Graduation Dinner & Disco on Tuesday 12<sup>th</sup> December 2017 .

Does your child have any medical condition that may affect him/her on this excursion?

.....  
.....

I have read the attached information regarding this excursion and understand what it contains.

Please find enclosed \$25.00 to cover the cost of the graduation dinner and disco.

FULL NAME OF PARENT / GUARDIAN  
..... (Please print)

SIGNATURE OF PARENT/GUARDIAN  
.....

CONTACT PHONE NUMBER OF PARENT ON DAY OF EXCURSION:  
.....

Payment: Cash  Credit Card  Direct Debit

Credit Card: Name \_\_\_\_\_ Class \_\_\_\_\_

Please debit my credit card account No.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Expiry Date: \_\_\_\_/\_\_\_\_

For the amount of \_\_\_\_\_ payable to Theodore Primary School

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Direct Debit: School EFT Details: BSB -032777 Account No: 001834



# THEODORE PRIMARY SCHOOL



*'A great place to grow up'*



## ACT Education Directorate Excursion Policy

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Please include your surname in the reference field



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