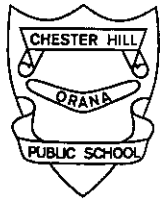


CHESTER HILL PUBLIC SCHOOL

Quality education in a caring learning environment

Address: Proctor Parade Chester Hill 2162
Email: chesterhil-p.school@det.nsw.edu.au

Phone: 9644 1286 9644 1251 Fax: 9743 8094
Web: www.chesterhil-p.schools.nsw.edu.au



Year 1 Riverside Theatre Performance

Dear Parents and Carers,

This term, Year 1 students are going on an excursion to watch a performance of the classic children's book 'Wilfred Gordon McDonald Partridge' at the Riverside Theatre. This production introduces concepts in our Semester 2 history unit 'Past, Present and Future'.

- When:** Wednesday 21 June 2023
- Where:** Riverside Theatre, Parramatta
- Time:** Students need to be at school by 9am. We will return before 3 pm. Travel to and from the venue will be by bus.
- Bring:** A small backpack with crunch and sip, recess, lunch, a bottle of water and a raincoat. Students must wear full school uniform including a school hat.
- Cost:** **\$20.00** This includes the show ticket and transport. This excursion is subsidised by the school. Please note there will be no refunds for children who are absent on that day. If paying online, please enter 'Year 1 Riverside Theatre Performance' in the payment description under 'excursions'. The last day for payment is Thursday 15 June.

Attendance on this excursion is dependent upon student behaviour.

Students must return the signed permission slip and payment to their class teacher by 15.6.23 to attend this excursion.

This excursion has the approval of the principal.

Mrs C. Baker
Year 1 Teacher

Mr L. Condon
Principal

Year 1: Riverside Theatre Performance

I give permission for my child _____ class _____ to travel by bus to and from the Riverside Theatre, Parramatta on Wednesday 21 June, 2023.

I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures. I acknowledge and accept that there is a risk that my child may be exposed to COVID-19 whilst attending and participating at this event. I confirm that my child will not attend if displaying any symptoms of illness, and/or if directed to isolate under public health orders.

Please tick one of the boxes to indicate your payment.

I have enclosed cash payment of \$20.00

I have made a payment online. My receipt number is: _____ Date paid _____

Signed (Parent/Carer)

Date