

EAGLES CUP – PALMYRA PS

Dear Parent,

Your child has been selected to play against Palmyra Primary School in the Eagles Cup competition in Football. Children need to wear the appropriate sports gear and bring a drink.

WHERE: Palmyra Primary School

WHAT: Football.

WHEN: Friday 4th May 2018 from 1.20pm-2.40pm. Children will leave school at 1:00pm and return by 3.00pm. Supervision of the children will be by Mr Dickinson.

COST: \$13.50 per child payable to the front office.

Please complete the 'Parent/Guardian Consent' form and Payment form attached and return to the front office by Thursday 3rd May 2018.

Patrick Sweeny
2nd May 2018





(Please Return to School Front Office)

Winthrop Primary School

PARENT/GUARDIAN CONSENT – FACTION SWIMMING CARNIVAL

Year Level Room No.

I have read and understand the information regarding Eagles Cup Football on **Friday 5th May 2018** and give my consent for my son/daughterto attend.
(FULL NAME)

I am aware that any costs incurred as a result of accident or illness are my responsibility and that school staff are not responsible for any loss or damage to my child's personal property that may occur during the course of the excursion.

I agree to inform the organisers before the scheduled excursion departure of any change to my child's health and fitness so that appropriate supervision may be arranged. I acknowledge that, should it be considered necessary, school staff will arrange to present my child for medical assessment.

Signed.....Parent/Guardian Date.....

Parent Contact Phone..... Parent Mobile Phone.....

Emergency Contact Number (other than parent) (1).....(2).....

Please note that we are no longer offering upfront payments. If you would like a current balance, please contact Chriss or Angela on 08 9310 6100 for your current balance.



(Please Return to School Front Office)

Winthrop Primary School

Payment Slip

Student's Name: _____ Yr Level _____ Rm No. _____

Amount Payable

EAGLES CUP – Palmyra Primary School AFL

\$13.50

(FULL NAME)

- Qkr App.**
- Cash** - Correct money only, no change given or responsibility accepted for lost cash or discrepancies.
- Cheque** - made out to Winthrop Primary School, student's name & phone number on reverse.
- My current account balance is sufficient to cover this excursion.**
- Credit Card** Type Of Card: **Visa** **Bankcard** **Mastercard**

N.B. We do not accept Diners, American Express or Overseas Bank Cards

CCV

Expiry Date _/ _/ _

Card Holders Name _____ Signature _____

_____ REFERENCE NO: Office use only. _____