20 February 2017

Stage 1 Girls Dance Group

Dear Parents/Carers,

Metella Road Public School has been very lucky during the past few years to form dance groups that have represented the school at local performances throughout the year. This year we have formed a Stage 1 Girls Dance Group comprising of girls from Years 1 and 2.

Your daughter has been selected to be a part of this Stage 1 Girls Dance Group and she will be required to attend weekly rehearsals during school time. These rehearsals will occur at lunch time on Thursdays. Some performances will be held during the school day however, there are quite a few performances that are held outside school time, usually in the evenings. Although we are aware that sometimes circumstances prevent children from attending all of these performances, it is important that we have members in the group who are committed to being part of a team. Parents will have the responsibility of getting their daughter to and from the venues during out of school hours.

The school also tries to cover the costs of costumes, however these can be very expensive, therefore we are asking for an upfront fee of $40.00. At the end of the year, students will be able to keep their costume as a memento of their time as a valued member of the Stage 1 Girls Dance Group. So that we can start to purchase the materials required to make our costumes, please return the permission slip and $40.00 to the front office by Monday, 13 March 2017.

We are very excited for another year of dance.

Thank you for your assistance and support of dance in 2017.

Mrs A. Bekiaris and Mrs R. Tyler
Stage 1 Girls Dance Group Coordinators

Mrs N. Parker
Relieving Deputy Principal
I give permission for my daughter, _____________________________________ of class ______ to participate in the Stage 1 Girls Dance Group. I am aware that some performances will be held outside school hours, and I will have the responsibility of getting my daughter to and from these performances. I am aware that this extra curricula activity has the approval of the Principal. Special needs of my child: (e.g. allergies, medication – please provide full details).

_____________________________________________________________________________
_____________________________________________________________________________

Parent/Carer signature: ___________________________________________ Date: __________

☐ I have enclosed $40.00 cash to contribute towards my child’s costume.

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**METELLA ROAD PUBLIC SCHOOL CREDIT CARD PAYMENT SLIP ONLY**

<table>
<thead>
<tr>
<th>NAME</th>
<th>CLASS</th>
<th>PAYMENT FOR:</th>
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NAME (as on Credit Card) ________________________________ EXPIRY DATE: ________

CREDIT CARD NO: _______ _______ _______ _______ TOTAL AMOUNT PAID: $___________

SIGNATURE ___________________________ CONTACT PHONE NUMBER: _______________

Method of Payment (Please Tick)
☐ VISA ☐ MASTERCARD

***please note: MINIMUM CREDIT CARD PAYMENTS $20***