



Tyabb Railway Station Primary School

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2nd May 2018

2018 Foundation – Grade 3 Gymnastics May-June 2018

Dear Parents,

This term we have decided to use part of our Sporting Schools Funding for Gymnastics. Foundation to Grade 3 students will participate in a 4 week gymnastics program held at Mornington Gymnastics located at Dunns Rd Leisure Centre, 350 Dunns Rd, Mornington 3931 (Melway Ref: 145 H4)

The dates for the 4 sessions are:

- Tuesday June 5th
- Tuesday June 12th
- Tuesday June 19th
- Tuesday June 26th

The sessions will go for 45 minutes. Students will either be in the 1pm to 1.45pm session or 1.45 to 2.30pm. All students need to be dressed in their uniform. NO DRESSES please.

Students will be travelling each week to the sessions via bus.

The total cost for the 4 week Gymnastics program is \$14.50 per student which will cover the bus for the 4 weeks. The Sporting Schools Funding will cover the cost of the Gymnastics for each student.

Please return the permission slip, with money attached to your classroom teacher by **Wednesday 30th May 2018**.

Michelle Sommers
Interschool Sport Coordinator

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2018 FOUNDATION TO GRADE 3 GYMNASTICS PROGRAM.

Please complete and return to your class teacher by Wednesday 30th May 2018.

I hereby give permission for my child _____ in Grade _____ to participate in the 2018 Gymnastics program on Tuesday 5th June, 12th June, 19th June and 26th June. **I enclose \$14.50 as a payment for the activity and I am aware that my child will be travelling via bus.**

I have enclosed \$14.50 payment Please use CSEF (*please check with the office*)

I have transferred \$14.50 using my Bpay details (*see office for unique code*)

In the event of accident or illness, I authorise the teacher-in-charge of this excursion to consent, where it is impracticable to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary.

SIGNATURE: _____

DATE: _____

PARENT NAME: _____

EMERGENCY CONTACT INFORMATION FOR (*for Tuesday 5th June, 12th June, 19th June and 26th June*)

CONTACT NAME : _____

PHONE NO. _____

I am able to assist with supervision and/or duties on the days of the Winter Sports

YES / NO