



# Thomas Acres Public School

Crispsparkle Drive, Ambarvale NSW 2560

Telephone: (02) 4626 4577

Fax: (02) 4626 8488

Email: thomasacre-p.school@det.nsw.edu.au

www.thomascre-p.schools.nsw.edu.au

Dear Parent/Carers,

7 February 2023

EXCURSION/EVENT	<b>Gala Day – Boys Soccer</b>		YEAR/STAGE	<b>Primary</b>
DATE	Term 2- Week 4 Friday 19 May, Week 8 Friday 16 June Term 3- Week 4 Friday 11 August, Week 8 Friday 8 September		COST	\$50.00 (Non-refundable)
VENUE DETAILS	TBC –			
TRAVEL ARRANGEMENTS	METHOD	Bus		
	DEPART FROM	Thomas Acres Public School	DEPART TIME	9:00am
	RETURN TO	Thomas Acres Public School	RETURN TIME	2:55pm
MEAL ARRANGEMENTS	Required - please provide lunch, recess and a drink			
EQUIPMENT REQUIRED	Sunscreen, Shin Guards, Soccer Boots			
UNIFORM DETAILS	Sports uniform, hat and school bag			
ORGANISER/TELEPHONE	Mr Buckley, Miss Raftry and Mr Morris – phone 4626 4577			
PAYMENT DUE DATE	Wednesday 3rd May, 2023			
EDUCATIONAL OUTCOME	As part of the PDHPE syllabus, students will learn how to maintain a happy and active lifestyle. By allowing your child to attend the primary Gala Day they gain the opportunity to enjoy sport and live a healthy lifestyle.			

If you wish for your child to attend, please complete the Permission Note and return it to the Office, along with your payment method by the due date. **If payment is not made by the due date, the position on the team will be offered to another student.**

*Thank You – Mr Buckley*

## PERMISSION FOR PRIMARY – GALA DAY- BOYS SOCCER

I hereby give permission for my child \_\_\_\_\_ of class \_\_\_\_\_ to attend Gala Day – Boys Soccer Excursion/Event on **Friday, 19 May, 16 June, 11 August, 8 September 2023** at a cost of **\$50.00 (Non-refundable)**. I understand that travel will be by **Bus**. My child has:

- Anaphylaxis     Asthma (severe or mild)     Allergies \_\_\_\_\_     Other \_\_\_\_\_

Parent/Carers Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PLEASE ENSURE THIS NOTE IS SIGNED & RETURNED AS PROOF OF PERMISSION TO ATTEND**

**Please select one (1) payment method below**

- ONLINE PAYMENT (\$10 minimum)** – My receipt number is \_\_\_\_\_ paid on \_\_\_\_/\_\_\_\_/\_\_\_\_  
Please enter **“Boys Soccer”** in the payment description under **“Excursion”**. **If using this method, please pay 2 days earlier than due date to allow time for the school to be credited with your payment.**
- EFTPOS (\$10 minimum)** - Accepted only by tapping/swiping card directly into EFTPOS terminal located in the Office. *Phone payments not accepted – consider using Online Payment instead.*
- CASH** - enclosed is \$\_\_\_\_\_. Adult making payment (please print full name) \_\_\_\_\_
- FIA (Fees in Advance)** – please use all/some of my credit for this payment



Office  
use