



Thomas Acres Public School

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Dear Parent/Carers,

15 August 2025

EXCURSION/EVENT	TRHS Cultural Sessions		YEAR/STAGE	Primary Koori Kids – 8 selected students
DATE	Start date: Thursday 21st August, 2025 (week 5) + every second week thereafter, until the end of the year: Term 3 – August 21 st , September 4 th & 18 th ; Term 4 – October 16 th & 30 th , November 13 th & 27 th , December 11 th .		COST	\$0 <i>There is no cost to attend this event</i>
VENUE DETAILS	THOMAS REDDALL HIGH SCHOOL, Ambarvale			
TRAVEL ARRANGEMENTS	METHOD	Bus (driven by Mrs Kelly, staff member of Thomas Acres Public School)		
	DEPART FROM	Thomas Acres Public School	DEPART TIME	11.40am
	RETURN TO	Thomas Acres Public School	RETURN TIME	1.20pm
ACCOMPANYING STAFF	Ms Veronica Kinchela (AEO) & Mrs Amanda Kelly (CLO)			
MEAL ARRANGEMENTS	Not required. Students will have their lunch before leaving school and will return in time for recess.			
UNIFORM DETAILS	School uniform, hat and water/drink bottle.			
ORGANISER/TELEPHONE	Ms Kinchela and Aboriginal Education Team – phone 4626 4577			
PERMISSION DUE DATE	Please give permission via Sentral, <i>as soon as possible</i> .			
EDUCATIONAL OUTCOME	This is a CULTURAL experience that is being offered to a small group of our Primary First Nations students by Thomas Reddall High School, in partnership with Ambarvale Public School. Students will further their develop knowledge and understanding of First Nations culture.			

If you wish for your child to attend, **please give permission via Sentral**.

Thank You – Ms Veronica Kinchela (AEO) & TAPS Aboriginal Education Team

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PERMISSION NOTE

I hereby give permission for my child _____ of class _____ to attend TRHS Cultural Sessions commencing on **Thursday 21st August 2025**. Cultural sessions will occur every second week (odd) throughout Term 3 and Term 4, 2025. I understand that travel will be by **bus**, driven by a staff member of Thomas Acres Public School. My child has:

☐ Anaphylaxis ☐ Asthma (severe or mild) ☐ Allergies _____ ☐ Other _____

Parent/Carers Signature: _____

Date: ____/____/____



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