DANCE 2016 – Term 1

Dear Parents,

Due to limited space and times, we will be restricting group numbers to 25 per group this year. Dance groups will look at a range of styles throughout the year, dependent on student interest.

All permission notes, with *money attached* are due to Miss Seeney by;

**Friday 12th February, 2016**

If there are more than 25 students wishing to join, all eligible* names will go into a hat and the first 25 randomly drawn by Mr Rankin and myself will be our dance group members. (*To be eligible, permission notes must be completed and money included).

Unfortunately some students will miss out, but this is the fairest chance we are able to offer. Students will be told by the end of Friday if they have been successful in gaining a place. Any money will be returned at the same time.

**Term One fees* will be $60 per student, per group.**

*Fees cover costumes, buses, entry fees and tuition costs.

**Girls,** please wear sneakers with some shorts/ t-shirt or dance clothes.

**Boys,** please wear some sneakers. School shorts are fine but wear another t-shirt please.

<table>
<thead>
<tr>
<th>Day/Time</th>
<th>Group</th>
<th>Teacher</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuesday 8am-9am</td>
<td>Years 5 &amp; 6</td>
<td>Miss Cassie</td>
</tr>
<tr>
<td>Tuesday Lunch Time</td>
<td>Years 3 &amp; 4</td>
<td>Miss Seeney</td>
</tr>
<tr>
<td>Friday 8am-9am</td>
<td>Year 2</td>
<td>TBC</td>
</tr>
</tbody>
</table>

Need any further information?

Please see Miss Seeney – Dance Coordinator

[matilda.seeney2@det.nsw.edu.au](mailto:matilda.seeney2@det.nsw.edu.au)
DANCE
TERM ONE 2016

I give permission for my child/ren to participate in the following dance groups:

Please write your child’s name and class next to ONE dance group :-

Year 2 Dance (Friday 8am) __________________________________________
Years 3 & 4 Dance (Tuesday Lunch) __________________________________
Years 5 & 6 Dance (Tuesday 8am) ____________________________________

My child has the following special needs / allergies:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

- I give permission for my child/ren to receive medical attention if required

- Parent / Guardian’s name____________________________________________________

- Signed__________________________________________ Date______________________

- I have enclosed ............... for TERM 1 dance fees. ($60 per child, per group)
  (If paying by cheque, please make out to Narrabeen Lakes Public School).

Please complete and return to school if paying by MASTERCARD/ VISA credit or debit card. Credit card minimum = $20. Please note, we do not have facilities for EFTPOS or other cards.

To: Narrabeen Lakes Public School.

Please charge $__________ to my ☐ Mastercard, ☐ Visa for payment of the above order (*please tick required box).

Name of Cardholder (please print): __________________________________________________________

Card No: _____/____/____/____ - _____/____/____/____ - _____/____/____/____ - _____/____/____/____

Expiry Date: ________________ Signature of Cardholder: ____________________________