



# CONNOLLY PRIMARY SCHOOL

Fairway Circle, Connolly WA 6027

Phone: 6206 3200

Email: connolly.ps@education.wa.edu.au

Website: www.connollyps.wa.edu.au

Dear Parents,



## YEAR 5 / 6 BOWLING

Students in Year 5 & 6 will be going to Zone Bowling in Joondalup for their end of year excursion on Thursday 13<sup>th</sup> December.

We will be leaving school at 8.50am and walking to Zone Bowling. Students will play two games of bowling commencing at 9.30am. Once the two games are completed, we will be walking back to school. At school we will be having a sausage sizzle lunch and an icy pole.

Students will need to be in full school uniform and bring a water bottle and hat. We won't be purchasing anything at bowling so students will not need to bring any money on the day. We will be watching movies when we return to school. Students are allowed to bring a snack to share for this.

**Total cost for the excursion is \$20.00 per student which includes two games of bowling, shoe hire and sausage sizzle lunch at school.**

***This excursion has been uploaded on Qkr, ready for digital permission and payment to be finalised. Preferred permission and payment at Connolly Primary School is through the Qkr app.***

Alternatively, please return the completed form below and provide payment by EFTPOS or online transfer to Connolly Primary School, BSB: 066-040, Account: 199 03645, Ref: child's surname, first name and reason.

Yours sincerely

Cathy Cole, Andrew Kaluzynski, Catherine Brennan and Tricia Paskett

*NOTE – Photographs of this activity may be used on our website or in print media. If you are unhappy with this arrangement regarding your child, please advise the school.*

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## YEAR 5 / 6 BOWLING



**To be returned to the office with \$20.00 by Friday 30<sup>th</sup> November 2018.**

Paid online  Use unallocated credit  EFTPOS

<b>Child's Name:</b>		<b>Room No:</b>
<b>☎ Home:</b>	<b>☎ Work:</b>	<b>☎ Mobile:</b>
Other Contact Information: .....		
I have read and understood the information regarding the excursion and give my consent for my son/daughter to attend.		
<b>Signature of parent/guardian:</b> .....		<b>Date:</b> .....

Please note: If any medical details for your child have changed, please contact the office so that records can be updated.