Altona North Primary School No 4931
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"Consider Others"
Tuesday, August 20th, 2013

FOPA (Festival of Performing Arts) PERFORMANCE

Dear Parent/Guardian,
As a member of the Altona North Primary School Choir and/or Instrumental Group, your child has been invited to perform in the local schools Festival Of Performing Arts (FOPA). This fantastic event will be held on Wednesday, 4th September, at the Carranballac College - Jamieson Way Campus hall.

Children are to come to school at the regular time on Wednesday morning - in BLACK CLOTHING. That is, black leggings, skirt, dress or pants & black top for girls; and long black pants and shirts for boys. Socks and shoes are also to be in black if possible. Students' hair is to be neatly presented, and any hair accessories are to be black. A normal packed lunch is to be brought along. Students are to meet with Miss McCawley and Miss Jedd in the music room when the bell rings at 8:45am. Students will be permitted to wear their out of uniform clothing for the remainder of the school day after FOPA.

The performance will begin at 10:30 am. Children will travel together to and from the festival by bus. They will depart from Altona North Primary School at 9:30am and return from Carranballac at 2:30pm. Students will stay the whole day to watch the second lot of performances in the afternoon. (Please complete form below).

Once again, your support of the Music and Performing Arts program here at ANPS is much appreciated. Parents are more than welcome to meet us there and watch the performance which will be at a time between 10.30am - 1:00pm on Wednesday 4th of September. We would love to see you there to cheer on our wonderful performers!

Kind regards,

Cassie McCawley
Music & Performing Arts

Jedd Davis
Music & Performing Arts

Brendan O'Brien
Principal

NAME ............................................ GRADE .................. ROOM ..............

I give permission for my child to attend FOPA (Festival of Performing Arts) on Wednesday 4th of September 2013.

I authorise the teacher in charge of the excursion to consent where it is impracticable to communicate with me to the child receiving such medical or surgical treatment as may be deemed necessary.

My child is currently taking medication. Yes / No (please circle)

Name of medication ................................ Dosage ........................................

Signed .................................................. Date ____________________________

Emergency contact phone numbers for this day:


