Dear Parents and Carers,

On Monday, 28 July 2014, during the celebrations of Education Week, Connells Point Public School will be showcasing some of our students’ talent in performances at Rockdale Plaza, Rockdale.

On this occasion, the Senior Band, Senior and Junior Girls’ Dance and the Boys’ Dance groups will be performing.

**Depart:** 8:30 am Load the bus with equipment and travel to Rockdale.

**Perform:** Between 10.00am and 11.00am, centre stage Rockdale Plaza.

**What to wear:** Senior Band: Band Uniform (with dance costume under if applicable)
All Dance Groups: Dance costume, covered with school jumper or jacket.

**What to bring:** BAND: Portable music stand, music and instruments.

The cost of transport will be at the subsidised value of $6 per child.

Students will be accompanied by four teachers: Mr Cohen, Mrs Smith, Miss Lovell and Mrs Christo the Bandmaster Mr Skues. Parents and friends are welcome to be in attendance at Rockdale Plaza to watch these students perform. We look forward to this opportunity to showcase our students’ talents to the wider community.

Mrs T. Corben        Mrs L. Smith
Relieving Principal       Coordinator

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**SCHOOL EDUCATION WEEK CONCERT – ROCKDALE PLAZA**

Permission form and money due by Thursday July 24.

I give permission for my child ________________________ of __________ (class) to participate in the Rockdale Plaza Education Week Celebrations on July 28 2014, as part of the SENIOR SCHOOL BAND/SENIOR GIRLS’ DANCE/JUNIOR GIRLS’ DANCE/BOYS’ DANCE (Circle all applicable).

I understand that travel will be by seat belted bus.

Enclosed is the sum of $6 to cover the costs involved in this excursion.

The following medical concern should be considered regarding my child’s participation on this date.

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Signed: __________________________________________     Date: _______________________
(Parent/Carer)