Dear Parent/Guardian,

Your child has expressed an interest in participating in the Knights of the Southern Cross Choir Festival on Thursday 11 August. This is the first year that St Benedict’s has participated in this festival and the children are very excited.

Students will need to be at St John Paul College, Nicholls at 11:00am and collected at 5:00pm. Ms Younger will meet the students there and provide supervision for the festival. Jovi van der kallan and Maria della Pozza will also be present for the entire event. All parents are most welcome to join us for all or part of the day. St Benedict’s performance time is currently provided for 2:45pm. Archbishop Prowse will present awards at 4.20pm.

Students will need to provide their own morning tea, lunch and water bottle as the college canteen will be closed on this day. Afternoon tea will be provided (please let Ms Younger know of any allergies). Students will wear their full Winter School uniform.

Day/date: Thursday 11 August 2016
Time: 11:00am – 5:00pm (approximately)
Venue: St John Paul College, 1021 Gungahlin Drive, Nicholls.

Please return the signed permission slip to Ms Younger by Friday 5 August if you wish your child to take part in this special event. Any further questions feel free to contact Ms Younger at school.

Yours sincerely,

Ms Meaghan Younger
Religious Education Coordinator
St Benedict’s Primary School

---

Pupil’s Statement: I, __________________________, am willing to obey the school rules whilst attending this excursion and will participate and cooperate in the official events as is expected of me.

Signature of Pupil: __________________________________________ Date:__________

Parent/Guardian Statement:
As Parent/Guardian of __________________________ I, __________________________ give my consent for him/her to participate in the Choir Festival at St John Paul College. I understand that it is my responsibility to transport of my child to and from St John Paul College, Nicholls. I agree to
delegate my authority to the staff involved. Such teachers may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group, or individually, in the above-mentioned activity.

I also authorise the teachers/instructors to obtain medical assistance which they deem necessary should an accident occur, and agree to pay all medical expenses incurred on behalf of the above student. I further authorise qualified practitioners to administer anaesthetic if such an eventually arises. Listed below are specific medical requirements or other needs relevant to my child participating in the excursion.

<table>
<thead>
<tr>
<th>Medical Condition (e.g. allergies, asthma)</th>
<th>Treatment Plan (Attach further details if necessary)</th>
</tr>
</thead>
</table>

Signed: _______________________________ Date: ____________

Emergency Contact Name: ___________________________ Number: ____________