

PLENTY PARKLANDS PRIMARY SCHOOL

EXCURSION/SPECIAL EVENT NOTICE

Date: Thursday 30th March

TITLE:	Mad About Science
CURRICULUM AREA:	In school workshop
HOME GROUPS INVOLVED:	4-23, 4-24, 4-29, 4-30
VENUE:	Plenty Parklands PS Classrooms
DATE OF EXCURSION/SPECIAL EVENT	Date: Tuesday 16/05/2023 4-23: 11.10 to 12.40 4-29: 1.50 to 3.20
	Date: Wednesday 17/05/2023 4-24: 11.10 to 12.40 4-30: 1.50 to 3.20
COST: \$20 Reminder: If there is any difficulty in paying on time, please phone the Principal or Business Manager to discuss arrangements.	\$20 Please note that the cost includes all charges for the event/excursion including, where relevant, transport costs, entry fee, venue, room and equipment hire and any other specific costs associated with the delivery of the program. If, for an exceptional reason your child does not travel to or from the event in the bus, for example, the school is still charged the full amount for transport and so unfortunately we cannot deduct costs from this amount.
NOTICE AND PAYMENT MUST BE RETURNED BY: <i>Please note: payment will NOT be accepted after the due date.</i>	3.30pm on Friday 12th May

If paying by cash/credit card, CSEF or School Credit please return permission section to the school by the due date. No need to return permission section if paying by Qkr.

If you are using your School Credit and have a balance to pay, you can make this payment using Qkr selecting Other Payment / Miscellaneous Payment. When using this option please return your signed permission form to the school.

✂-----

I give permission for my child _____ of home group _____ to attend the year **Mad About Science Workshop on Tuesday May 16th or May 17th.**

Date: _____

Signature _____

Amount enclosed: _____ **Qkr /Cash/Credit Card/CSEF/School Credit** (please circle)



Credit Card payment -----

PLENTY PARKLANDS PRIMARY SCHOOL – CREDIT CARD VOUCHER (to be used for amounts of \$10 and over)

Child's name	Home Group	Payment for: eg. Camp	Amount

Please charge my: Visa Mastercard Amount: \$ _____

Card Number _____

Expiry Date: ____ / ____ Name on Card: _____

Signature of Cardholder: _____ Phone No. _____ Date: _____