

# PLENTY PARKLANDS PRIMARY SCHOOL

Thursday 16<sup>th</sup> June, 2022

## **PREP to YEAR 3 SCHOOL DANCE PROGRAM NOTICE** **Dance lessons commence on Friday 5<sup>th</sup> August**

We are very pleased to once again be able to offer a dance program, conducted by professional dance teacher David Skinner, in the Prep to Year 3 Performing Arts curriculum. Lessons will be held at school in the hall.

**We are expecting that all Prep to Year 3 students will participate in the program**, regardless of their past experiences or current involvement in Dance. David will include some of the 'old favorites' as well as introducing some new routines to today's music.

**The cost for six lessons is only \$24.00** per student.

We are looking forward to another enjoyable and worthwhile aspect of our Performing Arts program.

<b>TITLE:</b> <b>CURRICULUM AREA:</b>	<b>Dance Program with David Skinner</b> <b>(6 weeks of lessons)</b> <b>Performing Arts</b>
<b>STUDENTS INVOLVED:</b>	<b>All students from Prep to Year 3</b>
<b>VENUE:</b>	<b>PPPS Hall – dance lessons</b>
<b>DATES:</b>	<b>Friday 5<sup>th</sup>, 12<sup>th</sup>, 19<sup>th</sup>, 26<sup>th</sup> August; 2<sup>nd</sup>, 9<sup>th</sup> September</b>
<b>COST:</b>	<b>\$24</b>
<b>SPECIAL REQUIREMENTS:</b>	<b>Appropriate footwear</b>
<b>NOTICE AND MONEY TO BE RETURNED BY:</b>	<b>3.30 p.m. Friday 22<sup>nd</sup> July</b>

**If you pay on Qkr you do not need to return the section, below**

✂----- Please cut off and return bottom section to the school by the due date -----

### **2022 P-3 Dance Program**

I give permission for my child \_\_\_\_\_ home group \_\_\_\_\_

to participate in the Dance Program with David Skinner and enclose \$24 to cover the cost of the program.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Amount enclosed: \_\_\_\_\_ Cash / Credit Card / Qkr / CSEF

**Credit Card payment** ✂-----

#### **PLENTY PARKLANDS PRIMARY SCHOOL – CREDIT CARD PAYMENT**

<b>Child's Name</b>	<b>Home group</b>	<b>for: i.e. Dance Program</b>	<b>Amount</b>

Please charge my: ☐ Bankcard ☐ Visa ☐ Mastercard Amount: \$ \_\_\_\_\_

Card Number \_\_\_\_\_

Expiry Date: \_\_\_\_ / \_\_\_\_ Name on Card: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_ Phone No. \_\_\_\_\_ Date: \_\_\_\_\_