

WANDIN YALLOCK PRIMARY SCHOOL
Grade 1 BBQ & Grade 2 Sleepover
Thursday 3rd December, 2015

We are holding our traditional Grade 2 Sleepover on Thursday 3rd December. This is viewed as an important lead up to the longer camps our students will be involved in from grade 3 on. The Grade 1's are invited to join in for the BBQ dinner on Thursday evening. All children will go home from school on Thursday at the usual time of 3.30pm and then return to school at 6.00pm. The grade 1's need to be collected no later than 8.00pm on Thursday night.

Grade 2's will stay on for games, supper, a film and sleepover with Mrs Marshall and Mrs King. Could grade 2's please bring a very small plate of healthy supper food to share later in the evening. Breakfast and lunch will be provided on Friday.

The Grade 2's will be participating in a camp like program at school on the Friday.

We ask for payment of \$5.00 for the Grade 1's and \$12.00 from Grade 2's to cover costs.

WHEN:	Thursday 3 rd December
WHERE:	WYPS Staff room
DROP OFF TIME:	Students to arrive at school at 6pm. No earlier please.
PICK UP TIME:	Grade 1's 8.00pm (Thursday). Grade 2's from 2.00 Friday afternoon.
COST:	\$5.00 for Grade 1's & \$12.00 for Grade 2's



PLEASE NOTE:

- We need parents to assist with the BBQ on Thursday night.
- All medication to be given to the class teacher with clear instructions on arrival.
- Please tell your child's teacher of anything they need to be aware of eg: bed-wetting, sleep walking etc. or special dietary considerations.
- All clothing items and bowls/utensils to be **clearly named**. Looking after your own belongings is great practice for future camp experiences!

WHAT DO THE GRADE 1'S NEED:

- A named plastic plate and a mug/cup in a bag.

WHAT DO THE GRADE 2'S NEED:

- Sleeping bag, **single** bed mattress (*if bringing a lilo please stay & pump it up with your child*) or equivalent, pillow, pyjamas, toothbrush/toothpaste, teddy, torch, face washer and change of clothes.
- 1 plastic bowl, 1 plastic plate, 1 mug and spoon in a plastic or calico bag (clearly named).
- Very small plate of healthy supper.



Please fill in the attached permission form and Medical report, and return to school as soon as possible.

Kind Regards
Sue Marshall & Annette King



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The Principal
Wandin Yallock Primary School

I give permission for my child _____ Grade _____ to attend the evening BBQ and /or Grade Two sleepover on Thursday 3rd December, 2015 at Wandin Yallock Primary School.

This confidential consent form asks for personal information about your child as well as family members that provide care for your child. All staff at Wandin Yallock Primary School and the Department of Education and Early Childhood Development are required by law to protect the information provided by this consent form.

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

Signed: _____ (Parent/Guardian) Date: _____

Contact Telephone Number on the night: _____

- I have completed the attached medical form for my grade 2 child.
- My child has special dietary needs as detailed below.
- I would like to help with the BBQ and preparation of food.



My child _____ Grade _____ has the following dietary needs/allergies:-

Please select Payment Method

(Please note you can include payment for all siblings in the one envelope but one consent form for each child must be included.)

- I enclose \$5.00 to cover the cost for my Grade 1 child.
- I enclose \$12.00 to cover the cost for my Grade 2 child.
- Please take payment from my account **which is in credit**.
- Please take payment from my **Camps, Sports, Excursion Funding** *(Approved recipients only)*.
- I enclose
 - Payment by cheque – (made payable to ‘Wandin Yallock Primary School’)
 - Payment by cash or EFTPOS at office
- Direct Deposit: Account Name – WANDIN YALLOCK PRIMARY SCHOOL
BSB: 633 000 Account: 117 554 592
Please use the Parent Family Name when entering your details.
- Payment by Credit Card – (MasterCard/Visa)

Credit Card No: _____ Expiry Date: ____/____

Amount: _____ Name as appears on Credit Card: _____

Cardholders Signature: _____