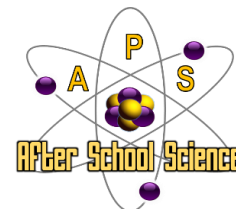


EXPRESSION OF INTEREST- Term 1 2019



Dear Parents and Students,

We are so excited to offer an **After School Science Program** that will be held on **Wednesdays** and **Thursdays** from 3.15pm – 4.15pm. The opportunity to participate is offered to students from grade 1 to grade 6. This term our focus will be on the following topics: **Understanding Science (including: atoms, molecules & states of matter), Physics, Geology and Ecology.**

We are excited to be involved in this fabulous program where our hands on experiments and activities will inspire fun and learning in each student involved. Please complete the attached form below to indicate interest and we will contact you.

A deposit of **\$30.00** will be required by **Wednesday 19th December** to allow time for the purchase of materials and to secure your child's place in the program. *The cost of each session will be \$10.00 and there will be 8 sessions throughout the term. If you would like to pay in full the cost is \$110 including the deposit.*

Please note that all payments need to be made in cash, **NO BPAY and sent to Mrs. Kenny (LS7) or Miss Hruschka (Room 12). It can also be left at the office in a clearly labelled envelope.**

Dates: Term 1 2019

Beginning week 2 of Term 1.

We will send home a letter if you are successful in your expression of interest. ***We will select students on a first in priority basis, so please get notes in as soon as possible.***

Thank you,

Mrs Kenny, Miss Hruschka and Jane Fiddes.

After School Science Program – Expression of Interest, Term 1 2019

Please return to Mrs. Kenny in LS7 or Miss Hruschka in room 12 with your child's name clearly labelled in an envelope and include the deposit by no later than Wednesday 19th December.

I wish to participate in the After School Program commencing in week 2 of Term 1.

Please tick your preferred day below:

Please enrol my child in the **Wednesday** program

☐

Please enrol my child in the **Thursday** program

☐

Child's Name: _____

Child's Grade: _____

Allergies: _____

Contact Name and Phone Number: _____

Please indicate the arrangements for your child after the class:

PLEASE CIRCLE

My child will be picked up

My child will walk home

My child will go to OSHC