



FAIRVIEW HEIGHTS STATE SCHOOL

"Growing Together, Learning Forever"



Primary Campus
Address:
75 McDougall Street
TOOWOOMBA Q 4350

Phone: 46 592 888
Fax: 46 592 800
Email: the.principal@fairheigss.eq.edu.au
SEP HOSE: 46 592 864
SEP Fax: 46 592 824

Principal:
Deputy Principal:
Business Services Manager:
SEP HOSE:

Julie Raitelli
Gary Pascoe
Jeanette Jurgs
Mark Postle

6 September 2016

Parents of Year 5 and 6 Students,

Term four Interschool Sport begins **Friday, October 7 (Week 1) and continues each Friday for seven weeks until Friday, November 18.**

Interschool Sport is an integral part of the Physical Education program therefore it is important that we have maximum participation. Any students who are unable to take part **MUST** bring a note. Students will take part in one of the sports listed below.

The cost for term four Interschool sport will be \$25. This cost covers bus transport, ice, first aid, and maintenance and repair of sports equipment. Thank you for your support of this system. To assist us with these costs we will require **payment due Thursday October 20** (week 3 sport). Please complete the payment slip below and send to the office.

N.B. Any students who receive 'major' behaviour incident referrals will not be eligible to participate in Interschool Sport for that week. Students will not receive a refund if they miss sport due to behaviour.

Please ensure that children have a hat, own water bottle, sunscreen, school uniform and suitable footwear relevant to their sport. Teams will train each Wednesday.


N.B. There are 2 sections to the slip below. Please return the accompanying payment slip (top section) with money to the office by Thursday October 20. Please return the permission form (bottom section) to your child's teacher by **THURSDAY October 6.**

Regards,

Alistair Aston
Physical Education Teacher

INTERSCHOOL SPORT PAYMENT SLIP Name: _____ Class: _____

This section of the slip and payment is due by Thursday 20 October.

- I have enclosed \$25.00 cash/cheque **OR** Eftpos **OR**
- Please take this amount from my child's Cash Advance(Slip must come through the office) **OR**
- Paid by  (As per invoice – emailed to Parents)

Signed _____(Parent/Guardian) Date _____

INTERSCHOOL SPORT PERMISSION NOTE

Please tick chosen sport (return this section to teacher before Thursday October 6)

- Girls Softball Boys Touch Mixed Volleyball
- Girls AFL Boys Cricket

I give permission for my son / daughter _____ in Class _____ to travel by Bus and participate in the Interschool Sport Program each Friday for Term 4, 2016.

I acknowledge that the Department of Education, Training does not have Personal Accident Insurance cover for Students.

Signed _____ Date _____
Parent/Guardian