

# THOMAS MITCHELL PRIMARY SCHOOL

## YEAR 1 ACTIVITY – SUPREME INCURSIONS ‘TOYS WORKSHOP’

27<sup>th</sup> April, 2017

### Introduction/Links to Curriculum:

As part of our Term 2 unit ‘Blast from the Past’, Supreme Incursions will visit Year 1 students at school. Students will participate in a hands-on workshop titled ‘Toys’ where they will rotate through four activity stations and have the opportunity to learn about and use toys from the past.

**Participants/Classes:** 1AL, 1JR, 1JW, 1JX and 1SB

**Date:** Tuesday 16<sup>th</sup> May, 2017

**Times:** 9am to 10.45am – 1AL, 1JX and ½ of 1SB  
11.15am to 12.45pm – 1JW, 1JR and ½ of 1SB

**Venue/Address:** Thomas Mitchell Primary School – LOTE Mandarin room

**Cost:** \$10.00  
**This cost is covered by the ‘Essential Items – Excursion Levy’ payment that all parents were requested to pay at the commencement of their child’s school year.** In the event your child does not participate (eg. due to illness) a credit will be placed against your family account.

**Uniform:** All students must wear school uniform.

**Permission form:** To be returned by: **Wednesday 10<sup>th</sup> May, 2017**

Sara Berardo  
Contact/Coordinating Teacher

John Hurley  
Principal

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### **THOMAS MITCHELL PRIMARY SCHOOL –YEAR 1 ACTIVITY – SUPREME INCURSIONS ‘TOYS WORKSHOP’**

I give permission for my child .....in class .....  
to participate in the above activity on Tuesday 16<sup>th</sup> May, 2017.

I understand that the cost of \$10.00 is covered by the Excursion Levy payment I have made.

I hereby authorise the teacher in charge of this event, to consent, where it is impractical to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary.

Parent Name: ..... Phone: .....

Signed: ..... Dated: .....

Contact for day of activity: ..... Phone for day of activity: .....