3 March 2014

Dear Parent/Carer,

The English Faculty has organised the following field study for **Year 10 & 11 Drama** students.

This activity aims to build students’ understanding of theatre, performance and study of Drama.

**DATE:** Tuesday 25 March 2014

**ACTIVITY:** “Jump for Jordan” performance

**VENUE:** Stables Theatre, 10 Nimrod Street, Kings Cross, ph.9332 1052.

**TIME:** Performance: 7:00 pm to 8:30 pm.

**TRANSPORT:** Students are to make their own way to the venue and meet Ms Hageman and Ms Smith at Gelato Messina, 241 Victoria Road, Darlinghurst **at 6:00 pm**.

**RETURN:** At the conclusion of the play, parents may collect students at the theatre, or the teachers, Ms Hageman and Ms Smith, will accompany students on the train from Kings Cross train station to Stanmore on the Inner West Line.

On the permission slip below, please indicate preferred travel arrangement.

**COST:** $28.00 per student (for theatre), to be paid to the front office by **2:00 pm, Friday 21 March**. Please bring **correct money** when paying.

**NOTE:** Please return permission note to Ms Smith by **Friday 21 March**.

Yours sincerely

Z. Smith (organiser)  
P. Hageman  
Drama Teacher, English Faculty  
Head Teacher English

Please return permission slip to Ms Smith in the English Faculty by Friday 21 March 2014. Make payment to the front office by 2:00 pm, Friday 21 March. Please bring correct money.

**NB:** Places are limited to the first 25 students to make payment.

---

I give permission for ________________________________ of Year _______ Drama to attend the field study “Jump for Jordan” at The Stables Theatre, Kings Cross on Tuesday 25 March 2014, 7:00-8:30pm, at a cost of $28.00. I understand the students are to make their own way to the meeting place, Gelato Messina, by 6:00 pm.

**Travel arrangements at the conclusion of the performance (tick one):**

☐ My daughter will be collected at the theatre by a parent/guardian

☐ My daughter will travel on the train with the teachers and alight at _______________________________ Station.

Signed (parent/carer): ________________________________  Date: ________________________________

Parent’s contact no.: day ________________________________ evening ________________________________

Student’s mobile no.: ________________________________

Please list any medical conditions/allergies we need to be aware of in relation to this activity:

________________________________________________________________________________________________________________________________________