East Bentleigh Primary School

Class 3A & 3L Arts Centre - Hamer Hall and Royal Botanical Gardens (Children's Garden) Excursion
Wednesday 17 May 2017

Dear Parents / Guardians,
To: Arts Centre Melbourne, Hamer Hall and Royal Botanical Gardens Melbourne, Children's Garden
Date: Wednesday 17 May 2017
Time: Leaving school by bus at 9:15am SHARP (please arrive at school by 9:00am). Back at school by 3:30pm.
Cost: $30.00
Food: Need to bring lunch in a paper bag (enough for the day as lunch and morning tea will be combined at 12:00-12.30pm.
Dress: School uniform
Purpose:

- Linking to the Steiner Class 3 Music Program, students will discover the unique sound of a symphony orchestra in MSO's ground breaking Meet the Orchestra concerts; a moment of wonder that will stay with them for life. With legendary musician James Morrison as their guide, students will dive head first into the music, instruments and exciting world of the Melbourne Symphony Orchestra. This performance will be tailored to the audience age group, an approach that will provide all students with the most educational value possible.

- Linking to the Science Curriculum – Biological Science, The Children's Garden is an interactive educational environment in which children of all ages, backgrounds, physical abilities and cultures can play, explore and discover the natural world. It features plants, water, structures and pathways that reflect Melbourne's changing seasons. The garden has been designed to intrigue, teach and excite children from a very young age about the importance of conservation and the environment. It is scaled specifically for children to create a sense of ownership, care and responsibility for the environment, exploring differences between living, once living and products of living things.

Warm regards, Alison and Laura

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<u>Permission & Payment Slip – Class 3A & 3L Arts Centre - Hamer Hall and Royal Botanical Gardens (Children's Garden) Excursion</u>

I give permission for my child……, in Grade/Class……..to attend the above mentioned excursion.
I, …… permit the teacher in charge to arrange for any medical treatment for my child as is deemed necessary at the time.

…… …… ……
Parent Signature **Date** **Contact No. on day of excursion**

Please find enclosed full payment: Cash or Cheque *(please circle)* OR

CREDIT CARD PAYMENT AUTHORITY – please complete all sections

Child's Name_____ Class_____

Master Card / Visa Expiry Date: ____/____ ***Amount*** **<u>$30.00</u>**

Cardholders Name: _____ Signature*:* _____

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