Dear Parents/Guardians,

Point Cook College P-9 will be hosting a “Beach Party” themed Disco and we invite all students to attend. Details are as follows:

**Prep and Year 1 Students**

**Time:** 2:00pm – 3:00pm  
**When:** Thursday 10\textsuperscript{th} September  
**Where:** Gym  
**Cost:** Gold coin donation

All students are asked to bring a gold coin donation which will serve as the entry fee into this awesome disco. Students may also choose to bring with them accessories related to a beach theme such as sunglasses, sun hats or Hawaiian shirts; students are still required to wear SCHOOL UNIFORM on the day, please do not send items students will need to change into as they will not have time to do so.

There will be many things happening during the afternoon including a DJ, dance competitions, best dancer awards and some fun beach games.

All of the proceeds from the disco will be donated to the State Schools Relief Fund who provide support to disadvantaged and underprivileged students in Victoria.

*We look forward to sharing this awesome event with your child*

We thank you for cooperation with our event. Let’s make it a huge success together!

If you would like your child to attend please sign and return the below slip

If you would like further information or have any questions please email the disco team on disco@pcc.vic.edu.au

Regards,
The Disco Team

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**BEACH PARTY DISCO**

I give permission for my child ………………………………. in class……………… to attend and participate in the “Beach Party” themed Disco on Thursday 10\textsuperscript{th} of September 2015. I have enclosed a gold coin donation to cover the costs for this event.

In the event of illness or injury to my child whilst at this incursion I authorise the teacher in charge of my child, if unable to contact me or it is otherwise impracticable to contact me, to consent to my child/ren receiving such medical or surgical attention as may be deemed necessary by a medical practitioner.

Relevant medical information _______________________________________________________________

My contact telephone number on this day will be ____________________________________________

Name of Parent/Guardian (Please Print) ___________________________________________________

Signature (Parent/Guardian) __________________________________ Date __________________________

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