

Dear Parent/Guardian

On Thursday 7 December 2017 during periods 2 & 3, we plan to take all Year 9 to Wagga Wagga Forum 6 Cinema to view the film: *The Star*.

This film is about the birth of Jesus from the view of the donkey and is rated PG. It links to what we have been doing in Christian Life Studies in relation to the theology of Jesus; fullyman, fully God, perfect, that we have been studying this term. We will be discussing this further during class after the viewing.

We will be departing the College by bus at 10:15am and returning at approximately 12:15pm. Students will be required to bring their own recess as per normal. Purchases from the candy bar will not be permitted for students so there will be no need for extra money for the excursion. The day is compulsory for all Year 9 students and they will need to wear full College uniform.

The cost of the excursion will be \$10.00 per student, to be paid to the College office by Thursday 30 November 2017 along with the permission slip. If you have any queries or questions about this excursion please don't hesitate to contact me at the College on (02) 6923 8888.

Kind regards

Emily Deighton  
CLS Teacher

Catherine Clarke  
Acting Deputy Principal

14 November 2017



## ACTIVITY NOTICE / TAX INVOICE

ABN: 71 032 808 826

Activity Title:	Year 9 CLS - Goes to the movies!		
Purpose:	Link CLS studies with the film: <i>The Star</i>		
Class/Group:	Year 9	Venue/Destination:	Wagga Forum 6 Cinema
Transport:	Bus		
Accommodation:	n/a		
Departure Date:	Thursday 7 December 2017	Departure/Start Time:	10:15am
Return Date:	Thursday 7 December 2017	Expected Return/Finish Time:	12:15am
WWCC Mobile Phone Number for Updated Return Details:	<b>0467 863 344</b>		
Total Cost:	\$10.00	Includes GST of:	NIL
Dress Code:	College Uniform		
Payment & Note Due:	Thursday 30 November 2017	Time:	9:00am
Teacher in Charge:	Invoice Date:	Signature:	
Emily Deighton	14 November 2017		

This is a valid TAX INVOICE when offer is accepted.  
**PLEASE SIGN THE SLIP BELOW, TEAR OFF & RETURN TO THE COLLEGE OFFICE.**

**PERMISSION**

I **DO/DO NOT** give permission for my son/daughter \_\_\_\_\_ who is in Year **9** to participate in **Year 9 CLS Movies** activity.

I am aware of the arrangements made for this activity. I acknowledge refunds are made in special circumstances and are credited to our Tuition Fee Account. Medical Authority held by the College remains current OR I will provide an updated Medical Authority prior to the activity. (delete as appropriate) To the best of my knowledge, he/she has no medical condition, physical disability or injury which puts him/her at risk in participating in these activities.

Parent's Name, Signature & Date \_\_\_\_\_ / /

Amount Enclosed \$10.00 (Cash/Cheque/Credit Card)

**4040 - 83**

**PAYMENT**

Name on Credit Card \_\_\_\_\_ Signature \_\_\_\_\_

Credit Card No. (Visa or Mastercard only) \_\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_

**PERMISSION NOTE & PAYMENT DUE: Thursday 30 November 2017**